

## Form A - Uniform Franchise Registration Application

# UNIFORM FRANCHISE REGISTRATION APPLICATION

		(Insert file number of immediately preceding filing of Applicant)	
State:_	Minnesota	Fee: \$300	
APPL	ICATION FOR (Check only one):		
	_ INITIAL REGISTRATION OF A	N OFFER AND SALE OF FRANCHISES	
<u>X</u>	REGISTRATION RENEWAL STATEMENT OR ANNUAL REPORT		
	PRE-EFFECTIVE AMENDMENT		
	_ POST-EFFECTIVE MATERIAL	AMENDMENT	
1.	Full legal name of Franchisor:		
	Mr. Sandless Franchise LLC		
2.	Name of the franchise offering:		
	Mr. Sandless, Dr. DecknFence		
3.	Franchisor's principal business address:		
	2970 Concord Road, Aston, PA 19014		
4.	Name and address of Franchisor's agent in this State authorized to receive service of process:		
	Minnesota Commissioner of Commerce 85 7th Place East, Suite 500 St. Paul, MN 55101	ce	
5.	The states in which this application is or will be shortly on file:		
	CA, HI, IL, IN, MD, MN, NY, ND, RI, SD, VA, WA, WI		
6.	Name, address, telephone and facsimile numbers, and e-mail address of person to whom communications regarding this application should be directed:		
	•	aum, PC; 175 Broadhollow Rd, Suite 175, Melville, NY acsimile: (516) 745-0293, E-mail: mfuelling@hlkpc.com	



## Certification

attached as those docum	an exhibit, and that all mate nents do not contain any mate scertification on behalf of the	nent with an issuance date of $\frac{4-7-2017}{2017}$ erial facts stated in all those documents are accurate and erial omissions. I further certify that I am duly authorized Franchisor and that I do so upon my personal knowledge.
Signed at	ASTON PA (City and State)	, PPU, Z13 , 20 17 (Date)
• _	(City and State)	(Date)
		Franchisor:
		MR. SANDLESS FRANCHISE LLC  By: Daw Green
		Name: DANIDE J. PARSALOWICZ
		Title: CEO
STATE OF	of Delaware	
		B day of 1201, 2017 the above-named
		the person who executed the foregoing application (as _
<u>Cé</u>	of the above	ve-named applicant) and, being first duly sworn, stated upon
oath that said	d application and all exhibits sul	bmitted herewith, are true and correct.
(NOTARY'	S SEAL)	Viele Lean Dervin
COMM	UNWEALTH OF PENNSYLVANIA NOTARIAL SEAL	(Notary)
ASTO	VICKI LEANN HARRIS Notary Public N TWP, DELAWARE COUNTY mission Expires Feb 24, 2020	



#### Form B - Franchisor's Costs and Sources of Funds

## FRANCHISOR'S COSTS AND SOURCE OF FUNDS

1. Disclose the Franchisor's total costs for performing its pre-opening obligations to provide goods or services in connection with establishing each franchised business, including real estate, improvements, equipment, inventory, training and other items state in the offering:

Category	Costs
Real Estate	\$0
Improvements	\$0
Equipment	\$0
Inventory	\$940
Training	\$879
Other (describe)	
Lodging	\$500
Vehicle	\$150
Totals	\$2,469

2. State separately the sources of all required funds:

These sums will be derived primarily from working capital and partially from the initial franchise fee.

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