

# MYWAY

## Dairy & Milk Franchise Application Form

Complete all required fields. This printable form follows the same section order as the online application.

### Step 1 of 6: Personal & Contact Information

Basic details so our franchise team can identify and reach you throughout the evaluation process.

**Full name (Required)**

**Date of birth (Required)**

**National ID / CNIC number (Required)**

**Current city of residence (Required)**

**Residential address (Required)**

  

**Phone number (Required)**

**WhatsApp number (Optional)**

**Email address (Required)**

# Step 2 of 6: Dairy & Retail Experience

Relevant experience helps us understand how prepared you are to run a fresh dairy retail business.

**Dairy business experience (Required)**

☐ None   ☐ Less than 1 year   ☐ 1–3 years   ☐ 3–5 years   ☐ 5+ years

**Milk retail experience (Required)**

☐ None   ☐ Less than 1 year   ☐ 1–3 years   ☐ 3–5 years   ☐ 5+ years

**Grocery experience (Required)**

☐ None   ☐ Less than 1 year   ☐ 1–3 years   ☐ 3–5 years   ☐ 5+ years

**Food retail experience (Required)**

☐ None   ☐ Less than 1 year   ☐ 1–3 years   ☐ 3–5 years   ☐ 5+ years

**Customer service experience (Required)**

☐ None   ☐ Less than 1 year   ☐ 1–3 years   ☐ 3–5 years   ☐ 5+ years

**Store management (Optional)**

☐ Yes   ☐ No

**Supplier experience (Optional)**

☐ Yes   ☐ No

**Inventory management (Optional)**

☐ Yes   ☐ No

**Have you previously owned a business? (Required)**

☐ Yes   ☐ No

**Briefly describe the business you owned (Optional)**

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# Step 3 of 6: Investment & Business History

Help us understand your investment readiness and any existing business commitments.

**Investment capacity (Required)**

☐ Under PKR 10 Lac    ☐ PKR 10–25 Lac    ☐ PKR 25–50 Lac    ☐ PKR 50 Lac – 1 Crore    ☐ Above PKR 1 Crore

**Primary funding source (Required)**

☐ Personal savings    ☐ Bank loan / financing    ☐ Family support    ☐ Business partner / investor    ☐ Other

**Please specify funding source (if Other) (Optional)**

**Describe your previous business experience, if any (Optional)**

**Business ownership history (Required)**

☐ Currently own a business    ☐ Previously owned a business    ☐ No business ownership history

**Tell us more about this business (Optional)**

## Step 4 of 6: Proposed Store

Details about where you intend to open your Dairy & Milk franchise location.

### City (Required)

### Area / neighborhood (Required)

### Preferred location / address (Required)

  

### Property status (Required)

☐ Owned ☐ Rented ☐ Planning to rent ☐ Not yet identified

### Shop size (Required)

### Unit (Optional)

☐ Sq. Ft. ☐ Sq. Yards ☐ Marla

### Expected monthly rent (PKR), if applicable (Optional)

### Expected opening date (Required)

## Step 5 of 6: Products, Operations & Business Planning

What you'll sell, how you'll run the store day-to-day, and your approach to building the business.

### Products

#### Product categories you plan to offer (Required)

☐ Fresh Milk ☐ Yogurt ☐ Lassi ☐ Butter ☐ Cream ☐ Cheese ☐ Other Dairy Products

#### Please specify other dairy products (Optional)

### Operations

#### Cold storage (Required)

☐ Available ☐ Planned ☐ Not available

#### Refrigeration (Required)

☐ Available ☐ Planned ☐ Not available

#### Storage area (sq. ft.) (Required)

#### Daily opening time (Required)

#### Daily closing time (Required)

#### Delivery capability (Required)

☐ Yes ☐ No ☐ Planned

#### Supplier relationships (Required)

☐ None yet ☐ Some initial contacts ☐ Established relationships

#### Expected staff count (Required)

#### Inventory management approach (Required)

☐ Manual / basic tracking ☐ Register or ledger based ☐ Digital / software based

#### How will you maintain product quality? (Required)

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#### How will you manage daily stock? (Required)

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#### How will you manage suppliers? (Required)

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## Business Planning

**Why MYYWAY? (Required)**

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**What are your business goals? (Required)**

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**How will you manage the store? (Required)**

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**Who are your target customers? (Required)**

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**Expected launch timeline (Required)**

☐ Within 1 month   ☐ 1–3 months   ☐ 3–6 months   ☐ 6+ months

**What are your expectations from MYYWAY? (Required)**

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## Step 6 of 6: Review & Declaration

Please review your application carefully before submitting.

### Review Summary

| Section                            | Items to Review                                                                                                                                                                                        |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Personal & Contact              | Full name; Date of birth; National ID / CNIC; Current city; Residential address; Phone; WhatsApp; Email                                                                                                |
| 2. Dairy & Retail Experience       | Dairy, milk retail, grocery, food retail and customer service experience; store management; supplier experience; inventory management; previous business ownership and details                         |
| 3. Investment & Business History   | Investment capacity; funding source; previous business experience; ownership history and details                                                                                                       |
| 4. Proposed Store                  | City; area; preferred location; property status; shop size and unit; expected rent; opening date                                                                                                       |
| 5. Products, Operations & Planning | Product categories; other products; cold storage; refrigeration; storage; opening/closing times; delivery; suppliers; staff; inventory; quality, stock and supplier plans; business planning responses |

### Declaration

By submitting this application, you confirm the information provided is accurate. Submitting this application does not guarantee franchise approval. MYYWAY evaluates every application individually based on suitability for this franchise category.

■ I declare that the information provided in this application is true and accurate to the best of my knowledge.

■ I understand this application will be reviewed by MYYWAY and that submission does not guarantee approval, franchise allotment or any income or profit outcome.

|                            |                  |
|----------------------------|------------------|
| Applicant Signature: _____ | Date: _____      |
| Full Name: _____           | Reference: _____ |