



# Kskin Korean Express Facial

## Kskin International Franchise Application

## Overview

Thank you for your interest in partnering with **Kskin Korean Express Facial** as an International Franchise Partner.

This application is issued by **Kskin Pte Ltd (“Kskin”)** as part of our initial **Expression of Interest (EOI)** process. It is designed to help us assess the strategic, operational, and financial suitability of prospective partners who wish to develop the Kskin brand in international markets.

The information you provide will form the basis of our preliminary evaluation. It is essential that all details submitted are **complete, accurate, and not misleading**, whether by inclusion or omission.

As part of our assessment process, Kskin may request additional information or supporting documents, including evidence of financial capability, where appropriate.

Submission of this application does **not** constitute an offer of franchise, nor does it create any obligation on the part of Kskin to proceed.

## *Fees and Costs*

Kskin Korean Express Facial is a brand under **KC Group Pte Ltd**, which acts as the holding company for the Kskin business and its related entities.

If Kskin decides to proceed with you as an International Franchise Partner, the franchise arrangement will include certain initial and ongoing fees payable to **KC Group Pte Ltd** or its appointed entity, subject to the approved territory and franchise structure.

These may include, but are not limited to, the following:

### **Initial Franchise Fee**

Payable upon execution of the franchise agreement. The amount is subject to the approved territory, market, and scope of development.

### **Royalty Fees**

Ongoing fees payable during the term of the franchise, subject to territory, location, and franchise structure.

### **Marketing & Brand Contribution**

A commitment towards local and/or system-wide marketing initiatives, in accordance with Kskin's brand and marketing guidelines.

In addition to the above fees, prospective franchise partners should take into account the following costs, which are the responsibility of the franchisee:

- **Premises costs**, including rent, deposits, utilities, and other occupancy-related expenses
- **Outlet setup and fit-out**, including but not limited to shop furniture, equipment (such as self-service or payment kiosks), interior décor, branch layout, painting, and signage, in accordance with Kskin's Operations Manual and brand standards
- **Pre-opening expenses**, including launch activities, local advertising, marketing campaigns, and promotional materials

### *Criteria for Assessment Of Suitability*

At **Kskin**, we adopt a structured and selective approach when evaluating prospective International Franchise Partners.

Our assessment considers a range of qualitative and quantitative factors, including but not limited to:

- **Relevant business and operational experience**, particularly in retail, service, beauty, wellness, or multi-unit environments
- **Financial strength and capability**, including the ability to support both initial investment and ongoing operations
- **People and leadership capability**, including the ability to recruit, train, and manage teams in line with Kskin standards
- **Commercial judgement and execution ability**, including local market understanding and decision-making discipline
- **Alignment with Kskin's brand values, operating philosophy, and long-term growth objectives**

Meeting the minimum criteria does not guarantee approval. Kskin retains full discretion in selecting franchise partners whom we believe are best positioned to represent and grow the brand sustainably in their respective markets.

### *Employment / Business History*

As part of the Kskin Franchise Expression of Interest process, you are required to complete all areas of this form and then sign the Declaration.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Country: \_\_\_\_\_

Province / State: \_\_\_\_\_

Nationality: \_\_\_\_\_ Race: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Sex (Male/Female): \_\_\_\_\_ Marital Status: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### *Educational Qualifications*

Highest Institutional Qualification: \_\_\_\_\_

Year Completed: \_\_\_\_\_

Others: \_\_\_\_\_ Year Completed: \_\_\_\_\_

## Employment / Business History

**Current Employer / Business Owned:** \_\_\_\_\_  
(Name of company)

Date Joined/ Left: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

Position / Duties: \_\_\_\_\_  
(For business owned, please describe business structure and duties)

**Previous Employer / Business Owned:** \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Position / Duties: \_\_\_\_\_  
(For business owned, please describe business structure and duties)

**\*Please attach latest resume if more than 1 previous employment or business**

## Other Information

Have you or your spouse ever applied for any franchise before? ☐ Yes ☐ No

If yes, please state details & year: \_\_\_\_\_

How did you learn about Kskin's franchise system?

- ☐ Current Franchisee
- ☐ Franchise Directories (FranchiseAsia; TopFranchise; FranchiseTrainer; \_\_\_\_\_)
- ☐ Social Media (IG, FB)
- ☐ Exhibitions
- ☐ Others: \_\_\_\_\_

---



---



---

If qualified, when can you attend/start full-time training? Please select one

- ☐ Immediate ☐ Within 3 months ☐ More than 3 months

How involved will you be in operating the Kskin outlet? Please select one:

- ☐ 0% ☐ 50% ☐ 100%

### *Financial Information*

What is the capital you have available for this franchise?

- ☐ Below USD 300,000
- ☐ USD 301,000 - USD 450,000
- ☐ USD 451,000 - USD 600,000
- ☐ Above USD 601,000
- ☐ Others (please specify): \_\_\_\_\_

Where will your investment monies come from? (You may select more than one)

- ☐ Personal Savings
- ☐ External Investors
- ☐ Bank Loan
- ☐ Others (please specify): \_\_\_\_\_

What is your Gross Income declared in the latest year of assessment?

\_\_\_\_\_

What is your annual sales turnover for your own business? (For Self- Employed/Business person)

- ☐ Below USD 100,000
- ☐ USD 101,000 - USD 250,000
- ☐ USD 251,000 - USD 500,000
- ☐ USD 501,000 - USD 1,000,000
- ☐ Above USD 1,000,000
- ☐ Others (please specify): \_\_\_\_\_

Would this business be your sole income source?      ☐ Yes      ☐ No

*Do You Intend To Have Investment Partners? If Yes, Please Kindly Provide Their Details:*

(1) Name of Partner : \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Nationality: \_\_\_\_\_ Race: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Highest Academic / Professional Qualification Attained: \_\_\_\_\_

(2) Name of Partner : \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Nationality: \_\_\_\_\_ Race: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Highest Academic / Professional Qualification Attained: \_\_\_\_\_

*Territory Or Territories Of Interest*

Please specify the country, city, or region you are interested in developing:

Please describe your familiarity, local presence, or market understanding of this territory:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_



### *Territory Or Territories Of Interest*

Please indicate your preferred development approach:

- ☐ Single-outlet pilot
- ☐ Multi-unit development
- ☐ Master Franchise (subject to further assessment)

Indicative 5-year vision (number of outlets, cities, or regions):

---

---

---

---

---

Any information you are able to provide as to why the particular territory is of interest to you would be helpful in Kskin's assessment:

---

---

---

*Other Background Information*

Have you visited a Kskin outlet before?    ☐ Yes        ☐ No

If so, where: \_\_\_\_\_

Are you applying for a Master Franchise / Area Franchise / Others (Please Elaborate):

\_\_\_\_\_

Do you currently own any franchise businesses?    ☐ Yes        ☐ No

If yes, please state details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Other Background Information*

Why are you interested in Kskin franchise?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you think you will make an ideal Kskin franchisee?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### *Other Background Information*

Do you intend to involve your family members in operating Kskin?

---

---

Do you have any previous experience in retail? Yes/No (If Yes, please kindly provide details)

---

---

---

Do you have any previous experience in operating a franchise business? Yes/No (If Yes, please kindly provide details)

---

---

---

What are the personal strengths and qualities you would bring as a Kskin franchisee?

---

---

---

---

What do you expect Kskin will do for you as a Kskin franchisee?

---

---

---

---

*Other Background Information*

Please list below any further skills you believe would support your application.

---

---

---

---

## Declaration

Had any administrative, criminal or civil action alleging a violation of any franchise law, fraud, embezzlement, fraudulent conversion, restraint of trade, unfair or deceptive practices, and misappropriation of property or comparable allegations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Been convicted of a felony or pleaded “no contest” to a felony charge or been held liable in a civil action by a final judgment or been the subject of a material complaint or other legal proceeding such as felony, civil action complaint, misappropriation of property or comparable allegations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Been adjudged bankrupt or reorganized due to insolvency?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered “Yes” to any of the questions above please explain:	

## Declaration

In providing us with the information in this Expression of Interest form,

1. You consent to us conducting further enquiries about you and in relation to such information as may be necessary to assist us in evaluating your Expression of Interest (including credit checks on you/your company/business and other proposed principals in the franchise).
2. You confirm that all the information you provide in this form or in the course of your interest in acquiring a Kskin franchise is true and correct in all respects and not misleading by inclusion or omission.
3. You acknowledge that Kskin has not represented that in accepting and considering your expression of interest Kskin will necessarily consider you a suitable candidate for a Kskin franchise.
4. You recognise and acknowledge the competitive value and confidential nature of all information provided by Kskin to you, and that it is for the sole purpose of assessing the Kskin franchise and it shall under no circumstances be disclosed to a third party.
5. You acknowledge that should Kskin decide in its absolute discretion to offer you the opportunity to acquire a Kskin franchise, Kskin will (subject to you signing an appropriate confidentiality agreement with Kskin) issue you with a formal disclosure statement, draft franchise agreement and other information necessary for you to make an informed assessment as to whether to acquire a Kskin franchise. Kskin shall have absolute discretion as to which (if any) of the parties who respond to the Expression of Interest process it elects to shortlist and then provide with formal disclosure documentation regarding the relevant franchise opportunity.
6. You acknowledge that Kskin will not be bound to you in any respect in relation to the grant of a Kskin franchise unless and until a formal franchise agreement is entered into and then on the terms and conditions of that agreement.
7. Personal Data Protection Consent (PDPA). By submitting this application, I agree that KC Group Pte Ltd. and its related companies may collect, use, and share my personal data to review and process my franchise application, contact me about the franchise opportunity, prepare related documents, and meet legal or regulatory requirements, in accordance with Singapore's Personal Data Protection Act (PDPA). I understand that my information may be shared on a need-to-know basis with relevant staff, advisers, business partners, or service providers, whether in Singapore or overseas, and may be kept for as long as necessary for these purposes.

Name: \_\_\_\_\_ Witness: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

*Address*

Please kindly send the completed Expression of Interest form to:

International Franchise Director (Mr Brian Ng)  
Kskin Pte Ltd

Email: **franchise@kskinfacial.com**