

HOME / AUTO LOAN APPLICATION FORM (PARTNERSHIP / CORPORATION)

Note: Please print legibly. If field not applicable, please write 'N.A.' Processing of application will start only upon submission of ALL required documents.

	DEALER/DEVELOPER CODE	BRANCH	CODE	RM/AO/BM	CODE
COLLATERAL	AUTO LOAN PURPOSE	CONSTRUCTION I	DESIRED LOAN AMC 4 YEARS SE CONDOMI DP	5 YEARS	TERM
CORPORATION / PARTNERSHIP INFORMATION	BUSINESS NAME PRINCIPAL BUSINESS ADDRESS MAILING ADDRESS TYPE OF ORGANIZATION NATURE OF BUSINESS MAJOR PRODUCTS NAME OF CONTACT PERSON		DRPORATION	TEL NO YEARS IN OPERATION DATE ESTABLISHED COMPANY WEBSITE COMPANY EMAIL TEL NO.	
LIST OF MAJOR STOCKHOLDERS		NATIONALITY	POSITION	% SHARE RES	
LIST OF DIRECTORS / PARTNERS		POSITION		NAME	POSITION
LIST OF PRIMARY OFFICERS		POSITION		NAME	POSITION
	SURETY NAME SURETY ADDRESS			INY INCOME	Trachen 144 C
					Together We Grow



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REFERENCES		NAME	ADD	RESS	TEL NO.			
	PERSONAL							
	TRADE							
	SUPPLIER							
FINANCIAL								
INFORMATION	TOTAL ASSETS	ŧ	TOTAL MONT	HLY INCOME	P			
	LESS TOTAL LIABILITIES	ŧ	LESS TOTAL	. MONTHLY EXPENSES	P			
	Net Worth: (As of 2	20) ₱	TOTAL MONT	HLY DISPOSABLE INCOME	P			
BANKS /		ACCOUNT TYPE	ACCOUNT NUMBER	CURRENT BALANCE	MONTHLY AMORTIZATION			
FINANCING	BANK/BRANCH	ACCOUNT TIPE		CURRENT DALANCE				
INSTITUTIONS								
DECLARATION								
	I/We warrant that all information provided in this application form are true and correct. I/We agree that any material misrepresentation or falsify can be used by Philippine Bank of Communications (PBCOM) to pursue civil and/or criminal liabilities against me/us. I/We understand that PBCOM may, at its sole discretion, deny this application and further agree that PBCOM has no obligation to notify and furnish me/us the reason for such denial. Furthermore, I/we agree that all information obtained by PBCOM shall remain its property whether or not the application is granted. I/We authorize PBCOM to obtain and disclose information about me/us from and to any branch or affiliate of PBCOM any reference source, any credit reporting agency or any third party, for purpose of, among others, evaluating this application form, for credit reporting, verification, and other risk management or regulatory requirements. I/we confirm and acknowledge that I/we shall hold PBCOM free and harmless from any liability that may arise from obtaining or disclosing such information. I/We authorize PBCOM to conduct verification with the Bureau of Internal Revenue (BIR) in order to establish the authenticity of my latest ITR and other accompanying financial statements submitted by me/us to PBCOM. I/We understand that if approved, the documentary stamp taxes, processing fees and such other fees as may be charged by PBCOM in connection with the loan shall be for my/our account. I/We hereby confirm that I/We have read, understood and agreed to all the stipulations herein stated. DATE SIGNATURE OF AUTHORIZED SIGNATORY OVER PRINTED NAME DATE SIGNATURE OF AUTHORIZED SIGNATORY OVER PRINTED NAME DATE							
INSURANCE (OPTIONAL)	I/We would like mor insurance provider	re information on Moto	rcar Insurance/Fire Insu	urance Product from PBC	OM's accredited			
		re information on Mort	agge Redemption Insur	ance Product from PRCO	M's accredited			
	I/We would like more information on Mortgage Redemption Insurance Product from PBCOM's accredited insurance provider							
					TE			
	SIGNATURE O	FAUITORIZED SIGNAT	DRY OVER PRINTED NAM	IE DA'	16			
	SIGNATURE O	F AUTHORIZED SIGNATO	DRY OVER PRINTED NAM	E DA'	TE			

