

CREDIT APPLICATION FORM FOR BUSINESS LOAN

(INDIVIDUAL / SOLE PROPRIETORSHIP)

 $\textbf{Instructions:} \ \ \mathsf{PLEASE} \ \mathsf{PRINT} \ \mathsf{ALL} \ \mathsf{INFORMATION} \ \mathsf{LEGIBLY} \ \mathsf{IN} \ \mathsf{CAPITAL} \ \mathsf{LETTERS.} \ \mathsf{Indicate} \ \mathsf{N/A} \ \mathsf{in} \ \mathsf{the} \ \mathsf{fields} \ \mathsf{which} \ \mathsf{are} \ \mathsf{not} \ \mathsf{applicable}.$

TYPE OF BORROWER PLEASE CHECK ONE	TYPE OF BORROWER PLEASE CHECK ONE					
☐ Individual ☐ Sole Proprietorship ☐ Principal Borrower ☐ Co-borrower ☐ Attorney-In-Fact						
(If co-borrower / attorney-in-fact, please indicate name of your principal borrower and relationship)						
First Name	PERSONAL DATA Middle Name	Last Name				
NAME PISS Name						
GENDER	BIRTH DATE (mm/dd/yyyy)	NICK NAME				
MARITAL STATUS Single Widowed for years Americal Legally separated for Legally separated for	BIRTH PLACE (Mun/City/Town, Province) years	•	ID PICTURE with signature at the back			
EDUCATIONAL Elementary Grad College Undergrad Voca	ational SSS / GSIS NO. grad / Doctorate	NO. OF CHILDREN				
MOTHER'S FULL MAIDEN NAME (First Name, Middle Name, Last Name)	TIN	NO. OF DEPENDENTS (Other than children)				
	ADDRESS DETAILS					
PRESENT ADDRESS (Please check the box if this is your mailing address) No./Street BI	gy.	ty/Municipality/Province	Zip Code			
RESIDENCE OWNERSHIP	TEL. NO.	FAX NO.	LENGTH OF STAY			
Owned Living with parents Company Q Mortgaged Living with relatives Rented Others, please specify:	MOBILE PHONE NO.	E-MAIL ADDRESS	YearsMonths			
PERMANENT / PROVINCIAL ADDRESS (Please check the box if this is y						
		ty/Municipality/Province	Zip Code			
RESIDENCE OWNERSHIP Owned Living with Mortgaged Living with	_	TEL. NO. () –	LENGTH OF STAY Years Months			
PREVIOUS ADDRESS No./Street Brgy.	City/Municipality/Province	Zip Code	LENGTH OF STAY			
	BUSINESS DETAILS		YearsMonths			
NAME OF BUSINESS		NATURE OF BUSINESS				
BUSINESS ADDRESS (Please check the box if this is your mailing address)						
No./Street Bi	gy. C	ty/Municipality/Province	Zip Code			
IS YOUR BUSINESS REGISTERED? ESTIMATED BUSINESS ASSET	TEL. NO.	FAX NO. () -	NO. OF YEARS IN THE BUSINESS Years Months			
BUSINESS PARTNER (If any)						
	EMPLOYMENT DETAILS (to be filled out if applica	ble)				
NAME OF PRESENT EMPLOYER		NATURE OF BUSINESS				
PRESENT EMPLOYER ADDRESS (Please check the box if this is your mailing a No./Street		ity/Municipality/Province	Zip Code			
EMPLOYMENT STATUS	TEL. NO.	FAX NO.	LENGTH OF SERVICE			
☐ Consultant ☐ Pensioner ☐ Recipient of ☐ Contractual ☐ Probationary ☐ Regular	Remittance NATURE OF WORK	RANK / POSITION	YearsMonths			
Freelance Project - Hired Trainee			T			
NAME OF PREVIOUS EMPLOYER		TEL. NO. () –	LENGTH OF SERVICE Years Months			
PREVIOUS EMPLOYER ADDRESS		RANK / POSITION IN PREVIOUS JOB				
ABOUT YOUR SPOUSE						
NAME OF SPOUSE First Name Middle Name Last Name						
GENDER Male AGE NATIONALITY	BIRTH DATE (mm/dd/yyyy)	BIRTH PLACE (Mun/City/Town, Province)				
EDUCATIONAL Elementary Grad College Undergrad Voca	ational SSS / GSIS NO. tgrad / Doctorate	TIN	MOBILE PHONE NO.			
PRESENT ADDRESS (Lot/House No., Street, Subd/Brgy, Mun/City, Province) TEL. NO.						
PERMANENT ADDRESS (Lot/House No., Street, Subd/Brgy, Mun/City, Province) TEL. NO. () -						
NAME OF PRESENT EMPLOYER (For Employed)		NATURE OF BUSINESS	RANK / POSITION			
PRESENT EMPLOYER ADDRESS (Lot/House No., Street, Subd/Brgy, Mun/City, Province) TEL. NO.						
NAME OF BUSINESS (For Self-Employed) NATURE OF BUSINESS						
BUSINESS ADDRESS (Lot/House No., Street, Subd/Brgy, Mun/City, Province) TEL. NO. () -						

		ABOUT YOUR					
NAME	AGE	NAME OF	SCHOOL (if studying	9)	SCHOOL ADDRESS (City/Town	1)	RELATIONSHIP
		INCOME / EXP	ENSE DETAIL	.S			
MONTHLY INCOM					MONTHLY EXPENSE		
INCOME SOURCE	SELF AMO	SPOUSE SPOUSE		E	EXPENSE TYPE		AMOUNT
OWN SALARY	SELI	37 0032	FOOD				
OWN SALANT			FOOD				
BUSINESS EARNINGS	UTILITIES (electric, water, telephone, etc.)						
COMMISSIONS			TRANSPORTATI	ON			
		IKANSPORTATION					
OTHERS, please specify: (1)			EDUCATION				
(2)			OTHERS, please	specify: (1)			
(3)				(2)			
TOTAL MONTHLY INCOME				(3)			
COMPINED MONTH II VINCOME		1	TOTAL MONTH	LVEVENCE		-	
COMBINED MONTHLY INCOME			TOTAL MONTH	LT EXPENSE			
BANK/FINANCIAL INSTITUTION	TVPE	EXISTIN DF LOAN	G LOANS ORIGINAL LO	IAN AMOUNT	MONTHLY AMORTIZATION	TERM (in mo	onths) OUTSTANDING BALANCE
BANK/ THURE ELEMONION	77725		ON ON VIETO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MONTE FAMOURE CONTRACTOR	TERM (III III	sinds, constitution and the
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1							
		CREDIT CA	RD DETAILS				
CREDIT CARD COMPANY	CAR	D NO.	MAXIMU	JM LIMIT	DATE ISSUED		EXPIRY DATE
		BANK AC	COUNTS				
BANK/BRANCH	ADDRESS	& TEL. NO.	ACCOL	INT NO.	TYPE OF ACCOUNT		OUTSTANDING BALANCE
						-	
1							
	l .	OTHER	ASSETS				
	1	AUTON	OBILES		1		61610
MANUFACTURER	МС	DDEL	YE	AR	ТҮРЕ		ENCUMBERED? (YES or NO)
		· · · · · ·					
1							
		STOCKS, BONDS, AN	D OTHER SECU	RITIES	<u> </u>		
NAME OF ISSUING CORPORA	TION		NO. OF	SHARES	ТО	TAL MARKET VA	ALUE
		PEVI ECTAT	E PROPERTY				
1051T011/100055			FLOOR AREA	LOT AREA			ENGLIMBEREDS (VEC
LOCATION / ADDRESS	TCT/C	CCT NO.	(m²)	(m²)	MARKET VALUE		ENCUMBERED? (YES or NO)
1							
			1				

	PERSONAL RE					
NAME	COMPLETE ADDRESS (Lot/House No., Street, Subo	d/Brgy, Mun/City, Province)	TEL. NO.	RELATIONSHIP		
	DOCUMENTARY R	EQUIREMENTS				
	(Please check documents submitted to	-	Form)			
STANDARD APPLICATION D	OCUMENTS		COLLATERAL DOCUMENTS			
5,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			G0==11=111=			
For all application		If loan is secured by REM				
Statement of Assets and Liabilities duly certified by the B	Photocopy of Transfer/Condominium Certificate of Title (TCT / CCT) of the property					
Audited and In-House Financial Statements and Income	Tax declaration for both land and improvement, Tax Clearance & Real Estate Tax Receipts of					
Photocopy of passbook, bank statements for the past s	, , ,	property for the current year				
other deposit accounts	x (o) months, certificate of time deposit and	Location Plan and vicinity maps duly signed by a licensed Geodetic Engineer				
Original copy of two (2) valid photo-bearing IDs with spe	cimen signature is presented and photocopy	☐ Bill of Materials				
submitted (also for spouse)		Building Plan or Floor Plan				
Original copy of Marriage Contract (if applicable) is prese	nted and photocopy submitted	Building Specification				
Two (2) pieces of recent 2x2 ID picture with signature at t	he back (also for spouse)	☐ Building Specifications ☐ Statement of Project Cash Flow and Assumptions				
TIN, SSS/GSIS Number and photocopy of Community Tax	Certificate (also for spouse)		·			
Original copy of Certificate of Business Registration with	DTI and photocopy is submitted	Pictures of the proper	ty			
Business Profile / History	,,	If loan is secured by Rece	ivables			
<u>,</u>	!	_				
Photocopy of Current Business Permit / Licenses		Certified List of Receiv	ables			
List of Trade Suppliers (foreign & local) with contact infor	mation	If loan is secured by Chat	<u>tels</u>			
List of Major Customers (foreign & local) with contact info	rmation	O.R. / C.R. (vehicle, ma	chinery, equipment)			
List of Affiliates with brief company background	!	Certified List of Invent				
		_	•			
Compulsory when applicable		Certified List of Equip	ment			
Photocopy of full monthly pay slip for the past three (3) n	nonths					
Original copy of latest Certificate of Employment with Co	mpensation or ITR for the past three (3) years					
Photocopy of Passport						
_						
Consularized Special Power of Attorney						
Others (as may be required by the Bank), please specify:		Others (as may be requi	ed by the Bank), please specify:			
	UNDERT	AKING				
	UNDERTAKING					
I/We hereby certify that all information I/we furnished		the required documents I/				
I/We hereby certify that all information I/we furnished documents. Should any of such information furnished loan proceeds have already been released).		the required documents I/				
documents. Should any of such information furnished loan proceeds have already been released).	by me/us be found to be false, the Bank mo	the required documents I/ ay disapprove this applicat	ion and/or declare the loan to be due	and demandable (in case the		
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FOR BANK USE ONLY	

DETAILS OF IDs PRESENTED					
TYPE OF I.D.	I.D. NO.	DATE/PL	ACE OF ISSUE	EXPIRY DATE (mm/dd/yyyy)	
	REFERRA	L DETAILS			
EXISTING BMI CLIENT? If yes, TYPE OF ACCOUNT WITH BMI Yes No Deposit Loan	Others, please specify:		EXISTING DEPOSIT / LOAN ACCOUN	T NO. WITH BMI	
ACCOUNT / BRANCH OFFICER			BRANCH		
	LOAN	DETAILS			
TYPE PURPOSE Loan Line Back-to-Back Loan Working Capital Discounting Line Term Loan Financing of Trad	Plant Expansion e Receivables Plant Construction		Purchase of Fixed Assets Others, please specify:		
AMOUNT TERM (in months)	RATE		MANNER OF PAYMENT		
COLLATERAL DETAILS					
TYPE OF COLLATERAL Cash Deposit maintained with the Bank Domestic Standby Letter of Credit	Real Estate Chattels		Receivables Others, please specify:		
DESCRIPTION OF OFFERED COLLATERAL/S					
CONTACT PERSON FOR APPRAISAL			CONTACT NOS.		