										Loan Purpose								
					LOA				Loan Amou			unt [			Date Filed			
			]	for EMP	PLOYEES o			panies	Term		6 mos. 12 mos.	□ 18 m □ 24 m		] 36 r ] Oth			_	
Las	t Name		Firs	st Name		Pt		_ INFORM/ /liddle Nam				Sex	(	To fa	cilitate	processing	$\mathcal{I}$	
				-	Single 🗌 Widowed			Living Togethe			No. of Dependents			of application, kindly fill up application form, writing N/A in areas not				
Current Home Address									Length of Stay			of Stay	applicable.					
Home Phone No. Mobile Phone No.			E-ma	E-mail Address Type o Reside				of Rented conce Owned			<ul> <li>Mortgaged Property</li> <li>Living w/ Relatives</li> </ul>			Please attach here photo of applicant				
SSS No.				TIN N	TIN No.					Driver's Lic. No./Valid Until								
Provincial Address (if any)														Length of Stay				
Previous Address (last prior address before current)															Lengt	h of Stay		
		N.				EMP	PLOYMEN	NT AND FIN	NANCE	S			-					
Em	ployer/Busines	ss Name										Type of Employed Employment Full/Part Ow			ner			
Bus	siness Address	5											Length of Stay w/ Co.					
Nature of Business Office Phone				one No.	e No. Positio			n			Basic Mo. Income			Other Income (Mo. Ave.)			ve.)	
Spouse's Last Name				Fir	First Name				Middle Name						Date of Birt	h		
Spouse's Employer/Business Name										Type of Employn					Employed ment E Full/Part Owner			
Bus	siness Address	5										1		Da	ite Hire	d		
Nature of Business Office Phone			one No.	No. Position				Basic Mo. Income					Other Income (Mo. Ave.)					
3 PERSONAL Name					PERSONAL AND CREE Address				REFERENCES				Relationsh			Contact No/	s.	
(relativ friends	ERENCES ves and s not living	-																
with y	ou) Bank/Financia	al Institution	n		Ac	Account Officer		er Type of Loa		N	lo. Amortization		/aturity D	ate	Credi	t Experience		
CREDIT experience																		
Bank/Credit Card Issuer, Branch					Accour		ard No.	Date Opened/Is		ued				Type of Ac				
													nt         O Savings         O Payroll         O Credit Card           nt         O Savings         O Payroll         O Credit Card					
6.0	Makar Laat No			F	irot Nom		CO-M	AKER INF	C		Middle	lama				Cov		
Co-Maker Last Name				F	First Name				Middle Name							Sex		
Date of Birth				Mai					Vidowed Living Toge				Fogether	No. of Dependents				
Cur	rrent Home Ad	dress													Lengt	h of Stay		
Home Phone No. Mobile Phone				Phone No	ne No. E			-mail Address			Type of Carley Rented Residence Owned				<ul> <li>Mortgaged Property</li> <li>Living w/ Relatives</li> </ul>			
SSS No.				TIN N	TIN No.				Driver's Lic. No./Valid Until									
Employer/Business Name/Address									1					Date Hired				
Nature of Business Office Phone				ne No.	No. Positio			on			Basic Mo. Income			Other Income (Mo. Ave.)				
	eby certify that the inorize CENTRAL VI							conduct the co	prrespond	ling cre		on.	ind correct	to the b	est of my	knowledge.		

I agree that this application form and the documents submitted in connection herewith become properties of CENTRAL VISAYAS FINANCE CORPORATION and will not be returned for whatever reason. I am aware that the statements/information gathered about me will be used to determine my eligibility for this Ioan. I also understand that should my application be denied, CENTRAL VISAYAS FINANCE CORPORATION is not obliged to disclose the reason for such rejection. I agree to provide CENTRAL VISAYAS FINANCE CORPORATION with additional information that may be required for the proper evaluation of my application. I agree to provide CENTRAL VISAYAS FINANCE CORPORATION with additional information that may be required for the proper evaluation of my application. I hereby warrant that should I change my current home address, I am under obligation to inform CENTRAL VISAYAS FINANCE CORPORATION of the new address, otherwise, I agree and understand that CENTRAL VISAYAS FINANCE CORPORATION shall consider stated address in this application form as my permanent address and any demand letter or notices sent via registered mail shall be deemed received.

PRINTED NAME AND SIGNATURE OF PRINCIPAL BORROWER/DATE SIGNED PRINTED NAME AND SIGNATURE OF CO-MAKER/DATE SIGNED

Please attach sketch of residence (borrower and co-maker). If possible, please use MAPS.GOOGLE.COM for easier reference. Thank you!