

APPLICATION DETAILS							
APPLICATION DATE (mm/dd/yyyy)		AMOUNT APPLIED FOR Php		PREFERRED RATE FIXING PERIOD <input type="checkbox"/> 1 Year Fixed <input type="checkbox"/> 3 Year Fixed <input type="checkbox"/> 5 Year Fixed		REPAYMENT METHOD <input type="checkbox"/> PDC <input type="checkbox"/> Auto-debit Bankcom Account No. _____	
<input type="checkbox"/> Principal <input type="checkbox"/> Co-Maker		PREFERRED TERM <input type="checkbox"/> 5 Years <input type="checkbox"/> 15 Years <input type="checkbox"/> 10 Years <input type="checkbox"/> 20 Years				BILLING REFERENCE <input type="checkbox"/> Home <input type="checkbox"/> Office	
<input type="checkbox"/> Individual <input type="checkbox"/> Corporate/ Business		PURPOSE OF LOAN <input type="checkbox"/> Purchase of House and Lot <input type="checkbox"/> Purchase of Townhouse <input type="checkbox"/> Purchase of Condominium		<input type="checkbox"/> House Construction <input type="checkbox"/> Renovation / Improvement		<input type="checkbox"/> Refinancing <input type="checkbox"/> Multi-Purpose Loan	
<input type="checkbox"/> 1st Application <input type="checkbox"/> Repeat Application Number of Repeats: _____							
COLLATERAL INFORMATION							
Collateral Address							
Area (Sq.M.)		TCT/CCT Number		Registered Owner			
Developer (If applicable)			Contact Person / Number to Schedule Appraisal				
PERSONAL INFORMATION							
TITLE <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.		SURNAME		GIVEN NAME		MIDDLE NAME	
CIVIL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Annulled <input type="checkbox"/> Legally Separated		CITIZENSHIP	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female		BIRTH DATE (mm/dd/yyyy)		PLACE OF BIRTH
		RESIDENTIAL STATUS <input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Company Provided <input type="checkbox"/> Mortgaged <input type="checkbox"/> With Family					
PRESENT ADDRESS (Unit No., Subdivision/Building, Street No., Street, Barangay, City, Province, Country)					ZIP CODE		YEARS IN PRESENT ADDRESS
PERMANENT ADDRESS (Unit No., Subdivision/Building, Street No., Street, Barangay, City, Province, Country)					ZIP CODE		YEARS IN PERMANENT ADDRESS
PREVIOUS RESIDENCE (Unit No., Subdivision/Building, Street No., Street, Barangay, City, Province, Country)					ZIP CODE		YEARS IN PREVIOUS RESIDENCE
LANDLINE NUMBER		MOBILE NUMBER		MOBILE NUMBER TYPE <input type="checkbox"/> Postpaid <input type="checkbox"/> Prepaid		FAX NUMBER	
						EMAIL ADDRESS	
HIGHEST EDUCATIONAL ATTAINMENT <input type="checkbox"/> Graduate <input type="checkbox"/> College / University <input type="checkbox"/> High School <input type="checkbox"/> Grade School			CHILDREN'S INFORMATION				
			Name		Birthdate		
WORK / BUSINESS INFORMATION							
EMPLOYMENT STATUS <input type="checkbox"/> Employed - Private <input type="checkbox"/> Employed - Government <input type="checkbox"/> Self-employed <input type="checkbox"/> OFW <input type="checkbox"/> Licensed Professional <input type="checkbox"/> Retired							
PRESENT EMPLOYER / BUSINESS NAME				PRESENT EMPLOYER INDUSTRY / BUSINESS TYPE <input type="checkbox"/> Banking / Finance <input type="checkbox"/> IT / BPO / Communications <input type="checkbox"/> Real Estate <input type="checkbox"/> Retail <input type="checkbox"/> Government <input type="checkbox"/> Manufacturing <input type="checkbox"/> Transport / Shipping <input type="checkbox"/> Others : _____ <input type="checkbox"/> Hotel / Restaurant <input type="checkbox"/> Travel Related			
PRESENT EMPLOYER / BUSINESS ADDRESS							
ZIP CODE		LANDLINE	FAX NUMBER		POSITION - TITLE / RANK		
BUSINESS EMAIL ADDRESS			YRS. WITH PRESENT EMPLOYER / YRS. OPERATING BUSINESS		IF EMPLOYED, TOTAL YEARS WORKING		
PREVIOUS EMPLOYER / BUSINESS NAME			YEARS WITH PREVIOUS EMPLOYER		SSS NO. / GSIS NO.		T.I.N.
SPOUSE INFORMATION							
SURNAME		GIVEN NAME			MIDDLE NAME		
CITIZENSHIP		BIRTH DATE (mm/dd/yyyy)			PLACE OF BIRTH		
PRESENT ADDRESS (Unit No., Subdivision/Building, Street No., Street, Barangay, City, Province, Country)					ZIP CODE		YEARS IN PREVIOUS RESIDENCE
LANDLINE NUMBER		MOBILE NUMBER		MOBILE NUMBER TYPE <input type="checkbox"/> Postpaid <input type="checkbox"/> Prepaid		EMAIL ADDRESS	
HIGHEST EDUCATIONAL ATTAINMENT <input type="checkbox"/> Graduate <input type="checkbox"/> College / University <input type="checkbox"/> High School <input type="checkbox"/> Grade School							
EMPLOYMENT STATUS <input type="checkbox"/> Employed - Private <input type="checkbox"/> Employed - Government <input type="checkbox"/> Self-employed <input type="checkbox"/> OFW <input type="checkbox"/> Licensed Professional <input type="checkbox"/> Retired							
PRESENT EMPLOYER / BUSINESS NAME				PRESENT EMPLOYER INDUSTRY / BUSINESS TYPE <input type="checkbox"/> Banking / Finance <input type="checkbox"/> IT / BPO / Communications <input type="checkbox"/> Real Estate <input type="checkbox"/> Retail <input type="checkbox"/> Government <input type="checkbox"/> Manufacturing <input type="checkbox"/> Transport / Shipping <input type="checkbox"/> Others : _____ <input type="checkbox"/> Hotel / Restaurant <input type="checkbox"/> Travel Related			
PRESENT EMPLOYER / BUSINESS ADDRESS							
ZIP CODE		LANDLINE	FAX NUMBER		POSITION - TITLE / RANK		
BUSINESS EMAIL ADDRESS			YRS. WITH PRESENT EMPLOYER / YRS. OPERATING BUSINESS		IF EMPLOYED, TOTAL YEARS WORKING		
PREVIOUS EMPLOYER / BUSINESS NAME			YEARS WITH PREVIOUS EMPLOYER		SSS NO. / GSIS NO.		T.I.N.

FINANCES						
MONTHLY INCOME			MONTHLY EXPENSES			
Source of Income	Principal Borrower	Spouse	Description of Expense	Amount		
Basic Income / Salary			Rental Expense			
Allowances			Household Expense			
Commissions / Bonuses			Education / Tuition Expenses			
Other Sources (Pls. Specify)			Loan & Credit Card Payments			
			Others (Pls. Specify)			
TOTAL MONTHLY INCOME			TOTAL MONTHLY EXPENSES			
EXISTING BANKCOM ACCOUNTS						
BRANCH		TYPE OF ACCOUNT (CA/SA/TD)		CURRENT BALANCE		
BANK REFERENCE						
BANK / BRANCH	TYPE OF ACCOUNT (CA/SA/TD)		ACCOUNT NUMBER	CURRENT BALANCE		
LOANS REFERENCE						
BANK / BRANCH	TYPE OF LOAN	ORIGINAL LOAN AMOUNT	OUTSTANDING BALANCE	MONTHLY AMORTIZATION	CONTACT PERSON	CONTACT NUMBER
CREDIT CARDS						
CARD ISSUER	CARD NUMBER	CURRENT CREDIT LIMIT	OUTSTANDING BALANCE PER LATEST STATEMENT			
REAL ESTATE PROPERTIES OWNED						
TYPE	TCT/CCT NO.	AREA (SQ.M)	ADDRESS (IF MORTGAGED)			
VEHICLES OWNED						
TYPE	SERIES	BODY TYPE	YEAR / MODEL	BANK (IF MORTGAGED)		
PERSONAL REFERENCES						
NAME	ADDRESS		RELATIONSHIP	LANDLINE / MOBILE NUMBER		
SOURCE OF PRODUCT INFORMATION						
<input type="checkbox"/> TV / Radio / Print Ad	<input type="checkbox"/> Brochure / Flyer	<input type="checkbox"/> Direct Mail	<input type="checkbox"/> Poster / Streamer	<input type="checkbox"/> Internet		
<input type="checkbox"/> Bank of Commerce Branch / Employee	<input type="checkbox"/> Bank of Commerce Accredited Developer	<input type="checkbox"/> Bank of Commerce Client	<input type="checkbox"/> Others			
REFERRAL INFORMATION (FOR BANK USE ONLY)						
DATE REFERRED	REFERRER NAME	REFERRER POSITION	BRANCH / DEPARTMENT / DEVELOPER	SOURCE / AGENT CODE		

I/We certify that all information furnished herein are true, correct and accurate and given for my/our loan application with Bank of Commerce (the "Bank"). I/We hereby authorize the Bank, its affiliate(s) and duly authorized representative(s) to do the following: (1) verify any information in this Application Form and/or the submitted documents, (2) obtain additional information about me/us from other sources, including but not limited to my/our present and/or previous credit transactions/dealings with other institutions/individuals, (3) conduct an appraisal of the property(ies) to be used as collateral through its duly authorized and accredited appraisers and to directly receive the appraisal results for its exclusive use, (4) facilitate the processing of my/our loan application.

I/We hereby authorize the institutions/individuals and other sources from whom the Bank had obtained/verified any information to disclose and provide the necessary data or information that would help facilitate the processing of my/our application.

Thus, I/We expressly waive any and all statutory provisions governing the confidentiality of information.

I/We agree that this Application Form and the submitted documents are now Bank of Commerce's property(ies) and will be used to evaluate whether or not to grant my/our loan application.

Upon acceptance of my/our application, I/we undertake to execute all agreements for the loan and bind myself/ourselves to the terms and conditions of such agreement. Furthermore, I/we are jointly and severally liable for all the charges, fees and expenses incurred or will be incurred by the Bank.

In case of loan disapproval, I/we hereby understand that Bank of Commerce is not obliged to disclose the reason(s) for such disapproval.

I/We agree and undertake to comply and submit all the loan requirements in accordance with the Bangko Sentral ng Pilipinas (BSP) circulars, rules, regulations as well as the Bank's policies. In the event of future delinquency, I/we hereby authorize to the Bank to report and/or include my/our name/s in the negative listing of any credit bureau or institution.

I/We authorize the Bank to send me/us updates on my/our loan application via SMS/text, email, mail and/or other available means of communication.

I/We fully understand that any misrepresentation or failure to disclose any information as required herein may be a reason for disapproval or cancellation of my/our loan application.

SIGNATURE OF BORROWER/CO-MAKER	DATE	SIGNATURE OF SPOUSE	DATE

GENERAL REQUIREMENTS

- 2 x 2 Pictures of Client and Spouse (if applicable)
- 2 Valid IDs (at least 1 government issued ID) - Photocopies / Specimen signed by Client and Spouse (if applicable)
- Latest 6 months Bank Statements or Passbooks - Photocopies
- Marriage Contract (if applicable) - Photocopy
- Proof of Billing Address (i.e. utility bill, postpaid phone bill)

ADDITIONAL REQUIREMENTS

- TCT / CCT (with Master Deed of Restriction) - Photocopy
- Tax Declaration (including lot and improvement) - Photocopy
- Real Estate Tax Receipt - Photocopy / Current year
- Real Estate Tax Clearance - Photocopy / Current year
- Lot Plan (with vicinity map) - Original / Certified by Licensed Geodetic Engineer
- For House Construction:
 - Building Plan / Floor Plan - Original
 - Bills of Materials / Construction Cost Estimates / Building Specifications - Original
 - Building Permits - Photocopy

INCOME REQUIREMENTS

Employed

- Certificate of Employment with compensation details and tenure - Original
- Income Tax Return (with BIR / bank stamp) or W2 (with complete signatures) - Photocopies / Latest 2 years
- Payslips or equivalent - Photocopies / Latest 3 months
- Proof of Other Income Sources (if applicable)

Self-Employed

- Business Registration Certificate issued by DTI (for sole proprietorships) or SEC (for corporations and partnerships)
- Audited and In-House (if applicable) Financial Statements - Photocopies / Latest 2 years
- Income Tax Return (with BIR / bank stamp) - Photocopies / Latest 2 years
- Company Profile - Original
- List of Major Suppliers / Customers - Original

Overseas Filipino Workers

- Certificate or Contract of Employment with compensation details, commencement date, and contract expiration date - Original
- Proof of Remittance - Photocopies / Latest 3 months
- Payslips or equivalent - Photocopies / Latest 3 months
- Proof of Other Income Sources (if applicable)

Please print and fax this form to (02) 570-7672. For inquiries you may call us at (02) 982-6443 or (02) 982-6447.