Bank of Commerce

An affiliate of San Miguel Corporation

CREDIT CARD APPLICATION

APPLICATION NO.: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

I am applying for: ☐ Classic ☐ Gold ☐ Platinum ☐ World ☐ Cash Installment Card

Note: You may receive a different card type depending on our credit evaluation.

APPLICATION REQUIREMENTS

1. Applicant must be between 21 to 65 years old for Principal cardholder and at least 15 years old for Supplementary.
2. Filipino resident or local resident foreigner.
3. Minimum annual income requirement is P120,000.
4. Must have an office or business landline and a residence landline or phone number.

For Cash Installment Card:

1. Applicant must be between 23 to 60 years old.
2. Minimum annual income requirement is P360,000.
3. With existing and active credit card with other local banks for at least 12 months.

Photocopy of One (1) Valid ID with Photo (For Principal and Supplementary)

List of Acceptable Valid IDs

- Philippine Identification (PhilID) Card or ePhilID
- Passport
- Driver's License
- Police Clearance
- Postal ID
- Voter's ID
- Barangay Certification
- Senior Citizen Card
- Seaman's Book
- Integrated Bar of the Philippines (IBP) ID
- Professional Regulations Commission (PRC) ID
- Maritime Industry Authority (MARINA) ID
- National Bureau of Investigation (NBI) Clearance
- Tax Identification Number (TIN) ID
- Overseas Filipino Worker (OFW) ID
- Social Security System (SSS) Card
- Government Service and Insurance System (GSIS) e-Card
- Overseas Workers Welfare Administration (OWWA) ID
- Department of Social Welfare and Development (DSWD) Certification
- Student ID issued and signed by the Principal or head of the School
- Government office and GOCC ID [e.g., Armed Forces of the Philippines (AFP), Home Development Mutual Fund (HDMF) IDs]
- Alien Certification of Registration (ACR) / Immigrant Certificate of Registration (ICR)
- ID / certification issued by the National Council on Disability Affairs (NCDA)
- IDs issued by "covered persons" registered with, supervised or regulated either by the BSP, SEC (i.e., corporations and partnerships) or IC (i.e., life and non-life insurance companies)
- Philippine Health Insurance Corporation's (PhilHealth) Health Insurance Card ng Bayan
- For retirees who are not Filipino citizen's, photo-bearing identification cards issued by the Philippine Retirement Authority (PRA)
- For foreign nationals, Passport or Alien Certificate of Registration

The Bank may require an additional valid ID with photo when necessary.

FOR CASH INSTALLMENT APPLICATION ONLY

REQUESTED CREDIT LIMIT

PHP_____

I understand that the approved credit limit is subject to BankCom's approval and BankCom may grant a lower credit limit depending on credit evaluation.

PURPOSE OF LOAN APPLICATION

DOCUMENTS REQUIRED

EMPLOYED
Any of the following:
- ☐ Original and latest Certificate of Employment and Compensation (COEC)
- ☐ Pay slips for the last three (3) months preceding the date of application
- ☐ Photocopy of Latest BIR Form 2316/W2 or ITR duly stamped as "Received" by the BIR/ authorized bank

PROFESSIONAL
- ☐ Latest Income Tax Return with Bank / BIR Stamp (MANDATORY)
- ☐ Latest AFS for the last 2 years with Bank / BIR Stamp
- ☐ Bank Statement for the last 6 months

SELF-EMPLOYED
Copy of complete business papers (MANDATORY):
- ☐ Single Proprietorship - Certificate of Registration of Business Name issued by DTI
- ☐ Corporation - Latest Articles of Incorporation (AOI), By Laws (BL) and Certificate of Registration issued by SEC, Certificate of Filing of AOI and BL, Board Resolution or Secretary's Certificate and List of Elected Officers
- ☐ Partnership - Articles of Partnership and Certificate of Registration issued by SEC

Any of the following:
- ☐ Latest Income Tax Return with Bank / BIR Stamp
- ☐ Latest Audited Financial Statements (AFS) for the last 2 years with Bank / BIR Stamp
- ☐ Bank Statement for the last 6 months

NON-FILIPINO CITIZEN
- ☐ Original and latest COEC (MANDATORY)
- ☐ Deed of Assignment for Hold-out on Deposit (MANDATORY)
- ☐ Original Comfort Letter (MANDATORY)

Any of the following:
- ☐ Special Investor's Resident Visa
- ☐ Visa issued by PEZA
- ☐ Certified True Copy of Passport
- ☐ Certified True Copy of Alien Certificate of Registration (ACR) or work permit

PERSONAL INFORMATION

TITLE	LAST NAME	FIRST NAME	MIDDLE NAME
☐ Mr. ☐ Mrs. ☐ Ms.			

Name to appear on the card (Limited to 19 characters including spaces)

BIRTHDATE (mm/dd/yyyy)	PLACE OF BIRTH	NATIONALITY	CITIZENSHIP	MOTHER'S FULL MAIDEN NAME	NO. OF DEPENDENTS

GENDER: ☐ Male ☐ Female

CIVIL STATUS: ☐ Single ☐ Married ☐ Separated ☐ Widowed

HOME OWNERSHIP: ☐ Owned ☐ Rented ☐ Mortgaged ☐ Used Free ☐ Company Provided ☐ Others

EDUCATION: ☐ Grade School ☐ Some College ☐ High School ☐ Graduate School ☐ College

HOME ADDRESS (PRESENT) — Bldg. / House No. | Street / Brgy. | District / Town | City / Province | Zip Code

TIN

PERMANENT ADDRESS — Bldg. / House No. | Street / Brgy. | District / Town | City / Province | Zip Code

SSS / GSIS

YEARS OF STAY

HOME PHONE NUMBER

MOBILE NUMBER ☐ Prepaid ☐ Postpaid

The mobile number indicated herein will be used for sending your balance, cardholder updates/ notices, security alerts, one -time-password, promotional information, etc.

ID SUBMITTED

TYPE _____

NUMBER _____

EMAIL ADDRESS

The email address indicated herein will be used for sending your electronic Statement of Account (E-Statement), cardholder updates/ notices, security alerts, promotional information, etc.

REFERENCE PERSON	CONTACT NUMBER/S	RELATIONSHIP

ADDRESS — Bldg. / House No. | Street / Brgy. | District / Town | City / Province | Zip Code

EMAIL ADDRESS

WORK AND FINANCES

☐ Employed ☐ Self-Employed

NAME OF OFFICE / BUSINESS	OFFICE / BUSINESS ADDRESS	ZIP CODE

OFFICE / BUSINESS PHONE NUMBER	FAX NUMBER	OFFICE / BUSINESS EMAIL ADDRESS	YEARS W/ PRESENT EMPLOYER	NO. OF YEARS WORKING

EMPLOYMENT TYPE: ☐ Private ☐ Government ☐ Self-Employed ☐ Retired ☐ Others: _____

POSITION: ☐ Senior Management ☐ Director ☐ Executive ☐ Supervisor ☐ Non-Officer ☐ Professional ☐ Teaching / Educational ☐ Sales ☐ Others: _____

INDUSTRY / BUSINESS TYPE: ☐ Real Estate ☐ Manufacturing ☐ Retail / Wholesale ☐ Agriculture / Forestry ☐ Hotel / Restaurant ☐ Government ☐ Medical ☐ Banking and Finance ☐ Insurance ☐ Utilities ☐ Transport / Shipping ☐ IT / Telco ☐ Construction ☐ Travel Related ☐ Education ☐ Mining ☐ Entertainment ☐ BPO ☐ Others: _____

FUNDS / AVE. MONTHLY INCOME: ☐ Under P10,000 ☐ P10,000 - P19,999 ☐ P20,000 - P49,999 ☐ P50,000 - P99,999 ☐ P100,000 - P249,999 ☐ P250,000 and above

PROFESSION

RANK

GROSS ANNUAL INCOME	OTHER INCOME	SOURCE OF FUNDS	DO YOU OWN A CAR?
		☐ Salary ☐ Business ☐ Pension ☐ Remittance ☐ Donation ☐ Interest ☐ Others: _____	☐ Yes, how many? _____ ☐ No ( ) Owned ( ) Mortgaged ( ) Company Leased

DEPOSIT ACCOUNT WITH BANK OF COMMERCE
Branch _____
Type of Account _____
Balance _____

ARE YOU A BANKCOM CREDIT CARD HOLDER? ☐ Yes ☐ No
Card Number _____
Credit Limit _____ Year Issued _____

OTHER CREDIT CARD
Issuing Bank _____
Card Number _____
Credit Limit _____ Year Issued _____

OTHER CREDIT CARD
Issuing Bank _____
Card Number _____
Credit Limit _____ Year Issued _____

SPOUSE INFORMATION

TITLE	LAST NAME	FIRST NAME	MIDDLE NAME
☐ Mr. ☐ Mrs. ☐ Ms.			

BIRTHDATE (mm/dd/yyyy)	CITIZENSHIP	EMAIL ADDRESS	MOBILE NUMBER ☐ Prepaid ☐ Postpaid	☐ Employed ☐ Self-Employed

NAME OF OFFICE / BUSINESS	OFFICE ADDRESS	ZIP CODE	OFFICE PHONE NUMBER	YEARS WITH PRESENT EMPLOYER

RELATIONSHIP TO GOVERNMENT OFFICIAL (1st degree of consanguinity and affinity) (Please use another sheet if necessary)

NAME	RELATIONSHIP	HIGHEST POSITION OCCUPIED	PERIOD COVERED

RELATIONSHIP TO BANK OF COMMERCE ACCOUNTHOLDER/S (Please use another sheet if necessary)

NAME	RELATIONSHIP

The corporate logo of San Miguel Corporation is a registered trademark of San Miguel Corporation, and is used under license.

SUPPLEMENTARY CARDHOLDER INFORMATION (Applicant must be at least 15 years old) *Not Applicable for Cash Installment Card*

SUPPLEMENTARY CARD

LAST NAME	FIRST NAME	MIDDLE NAME	GENDER
			☐ Male ☐ Female

Name to appear on the card (Limited to 19 characters including spaces) | TIN

BIRTHDATE (mm/dd/yyyy)	PLACE OF BIRTH	NATIONALITY	CITIZENSHIP	RELATIONSHIP TO PRINCIPAL CARDHOLDER	SSS / GSIS

HOME ADDRESS (PRESENT) — Bldg. / House No. | Street / Brgy. | District / Town | City / Province | Zip Code | MOBILE PHONE NUMBER

PERMANENT ADDRESS — Bldg. / House No. | Street / Brgy. | District / Town | City / Province | Zip Code | YEARS OF STAY | HOME PHONE NUMBER

CIVIL STATUS
☐ Single ☐ Separated
☐ Married ☐ Widowed

SOURCE OF FUNDS
☐ Salary ☐ Pension ☐ Donation
☐ Business ☐ Remittance ☐ Interest
☐ Others: _____

ID SUBMITTED
TYPE _____
NUMBER _____

EMAIL ADDRESS
_____
I authorize the Bank to send updates and promotional information using my email address as indicated herein. ☐ YES ☐ NO

☐ Employed
☐ Self-Employed

NAME OF OFFICE / BUSINESS | OFFICE / BUSINESS ADDRESS | ZIP CODE

OFFICE / BUSINESS PHONE NUMBER | FAX NUMBER | OFFICE / BUSINESS EMAIL ADDRESS | YEARS W/ PRESENT EMPLOYER | NO. OF YEARS WORKING

EMPLOYMENT TYPE
☐ Private ☐ Government
☐ Self-Employed ☐ Retired
☐ Others: _____

POSITION
☐ Senior Management ☐ Director
☐ Executive ☐ Supervisor
☐ Non-Officer ☐ Professional
☐ Teaching / Educational ☐ Sales
☐ Others: _____

INDUSTRY / BUSINESS TYPE
☐ Real Estate ☐ Banking and Finance ☐ Education
☐ Manufacturing ☐ Insurance ☐ Mining
☐ Retail / Wholesale ☐ Utilities ☐ Entertainment
☐ Agriculture / Forestry ☐ Transport / Shipping ☐ BPO
☐ Hotel / Restaurant ☐ IT / Telco ☐ Others: _____
☐ Government ☐ Construction
☐ Medical ☐ Travel Related

FUNDS / AVE. MONTHLY INCOME
☐ Under P10,000
☐ P10,000 - P19,999
☐ P20,000 - P49,999
☐ P50,000 - P99,999
☐ P100,000 - P249,999
☐ P250,000 and above

PROFESSION | RANK

MOTHER'S FULL MAIDEN NAME | SPOUSE NAME

RELATIONSHIP TO GOVERNMENT OFFICIAL (1st degree of consanguinity and affinity) (Please use another sheet if necessary)

NAME	RELATIONSHIP	HIGHEST POSITION OCCUPIED	PERIOD COVERED

RELATIONSHIP TO BANK OF COMMERCE ACCOUNTHOLDER/S (Please use another sheet if necessary)

NAME	RELATIONSHIP

Sub-limit assignment begins at a minimum of P5,000 and increments of P5,000. The sub-limit given to the Supplementary cardholder is part of the Principal cardholder's credit limit. The maximum spending limit of the Supplementary cardholder shall not exceed the approved credit limit of the Principal cardholder. If no sub-limit is indicated, the default will be 100% of Principal cardholder's credit limit.

CREDIT LIMIT TO BE ASSIGNED (SUBLIMIT)

DELIVERY AND MAILING INSTRUCTIONS

MAILING ADDRESS

Deliver my Bank of Commerce Credit Card to my:
☐ HOME ADDRESS ☐ BUSINESS ADDRESS

Deliver my Bank of Commerce Credit Card Statement of Account to my:
☐ HOME ADDRESS ☐ BUSINESS ADDRESS ☐ EMAIL ADDRESS

E-STATEMENT FACILITY AND NOTICES

☐ By choosing to receive my statement of account thru my email address stated, I will no longer receive paper copy thereof and I hereby authorize Bank of Commerce to enroll my Credit Card account in Bank of Commerce E-Statement Facility.

By signing up for and/or using the E-Statement Facility, I accept and agree to be bound by all operational rules and general terms and conditions governing the Bank of Commerce Credit Card E-Statement, which can be found at the Bank's website at www.bankcom.com.ph.

If no email address is provided, a paper copy of the Statement of Account will be sent to the declared billing address.

For notices including amendments in the terms and conditions that will result to fees to be paid or charged to my account, I prefer notification via: ( ) email ( ) text message

MODE OF PAYMENT (If Account Number is not provided, payment mode is "Pay to Bank")

☐ Pay to Bank ☐ Auto Debit my Account (ADA)

Auto Debit my **BankCom Peso Account No.**
_____
☐ Full Amount Due
☐ Minimum Amount Due

Auto Debit my **BankCom Dollar Account No.**
_____
☐ Full Amount Due
☐ Minimum Amount Due

IMPORTANT:
- *The BankCom deposit account must be under the Applicant's name.*
- *Default will be MINIMUM AMOUNT DUE if no selection has been made.*

TERMS AND CONDITIONS FOR ADA ENROLLMENT

1. Payment under the ADA facility will be debited on actual due date as indicated in my Statement of Account.
2. The authority under this ADA shall remain valid with respect to replacement card without prejudice to the right of the Bank to require a new ADA.
3. Should the Bank fail to implement this ADA for three (3) consecutive billing cycles for reason not attributable to the Bank, the Bank may, without need of notice, disenroll the Account from the ADA facility.
4. The authority under this ADA shall continue to be effective until the Bank receives a duly accomplished ADA cancellation request at least seven (7) banking days prior to the intended date of cancellation.

FEES AND CHARGES

(The Bank may, from time to time, change, amend, revise, modify or increase the fees and charges with prior notification to the cardholders.)

	CLASSIC	GOLD	PLATINUM	WORLD	CASH INSTALLMENT
Annual Membership Fee					Php2,400 billed on Installment for 12 months. Php200 billed every month.
Principal Card	Php1,500	Php3,000	Php4,000 *Php5,000	Php5,000 *Php6,000	
Supplementary Card	Php750	Php1,500	Php2,000 *Php2,500	Php2,500 *Php3,000	NA
Finance Charge / Interest Rate per month	3%	3%	3%	3%	3%
Finance Charge / Interest Rate Computation	The finance charge will arise from the non-payment in full of the outstanding balance on a given statement cut-off date and shall continue to be imposed until the outstanding balance and applicable interest are fully paid. Interest will be computed based on the previous outstanding balance as reflected in the Statement of Account computed from the start of the cycle date to a day before the payment transaction date plus previous outstanding balance less payment made and any credit adjustment computed from the payment date to next cycle date. Interest on cash advances are computed from transaction date to the next statement date.				
Minimum Amount Due	**5%** of the Total Outstanding Balance or **Php500** whichever is higher (Peso billing); or **3%** of the Total Outstanding Balance or **USD50** whichever is higher (Dollar billing). The minimum amount due consists of the following: (a) a % of the Total Outstanding Balance inclusive of all fees and charges, (b) past due amount, (c) monthly installment amount; and (d) any amount in excess of the credit limit. The minimum amount due is the sum of (a), (b), (c) and (d) or **P500/USD50**, whichever is higher.				
Late Payment Fee	**Php1,200** or the unpaid Minimum Amount Due, whichever is lower.		**Php1,200** or the unpaid Minimum Amount Due, whichever is lower (Peso Billing). **USD22** or the unpaid Minimum Amount Due, whichever is lower (Dollar Billing).		**Php1,200** or the unpaid Minimum Amount Due, whichever is lower.
Cash Advance Fee and Interest	**Php200** per transaction plus prevailing finance charge		**Php200** per transaction (Peso Billing) or **USD4** per transaction (Dollar Billing) plus prevailing finance charge		**NA**
Cash Advance Service Charge (Over-the-Counter)	**Php100**				**NA**

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FEES AND CHARGES (Continuation)

	CLASSIC	GOLD	PLATINUM	WORLD	CASH INSTALLMENT
Cash Loan Availment Fee	**NA**	**NA**	**NA**	**NA**	**Php200 per transaction**
Foreign Currency Conversion Fee	Purchases in foreign currencies will be converted automatically to Philippine Peso (Php) at Mastercard's currency conversion rate plus foreign currency conversion fee of 2.5% (consists of Mastercard's assessment fee and Bank of Commerce service fee).		Purchases in foreign currencies will be converted automatically to Philippine Peso (Php) at Mastercard's currency conversion rate plus foreign currency conversion fee of 1.5% (consists of Mastercard's assessment fee and Bank of Commerce service fee). *Purchases in third currencies (non-dollar) will be converted automatically to US dollar at Mastercard's currency conversion rate plus foreign currency conversion fee of 1.5% (consists of Mastercard's assessment fee and Bank of Commerce service fee).		Purchases in foreign currencies will be converted automatically to Philippine Peso (Php) at Mastercard's currency conversion rate plus foreign currency conversion fee of 2.5% (consists of Mastercard's assessment fee and Bank of Commerce service fee).
Charge Slip Retrieval Fee	**Php300 for local and USD6 for international purchases**				
Card Replacement Fee	**Php500 for lost card or damaged card**				
Returned Check Fee	**Php1,000**				
Installment Pre-Termination Fee	**Php1,000**				
Closed Account Maintenance Fee	**Php200**				
Gaming Transaction Service Fee	**5% of the transaction amount**				
Overlimit Fee	Php750 when outstanding balance exceeds credit limit (transactions plus interest and fees)		Php750 or USD14 when outstanding balance exceeds credit limit (transactions plus interest and fees)		Php750 when outstanding balance exceeds credit limit (transactions plus interest and fees)
Quasi Cash Fee	**5% of the transaction amount/ quasi cash transaction**				
SOA Re-print Fee	**Php100 per re-print request of SOA**				
Refund Fee	**Php500 per request (refund for over payment only)**				
Multiple Payment Fee	Php50 for each payment in excess of 3 payments within the same cycle from non-BankCom payment channel.		Php50 or USD1 for each payment in excess of 3 payments within the same cycle from non-BankCom payment channel.		Php50 for each payment in excess of 3 payments within the same cycle from non-BankCom payment channel.
ADA (Auto Debit Arrangement) Fee	Php200 for every unsuccessful ADA processing due to insufficient funds		Php200 or USD4 for every unsuccessful ADA processing due to insufficient funds		Php200 for every unsuccessful ADA processing due to insufficient funds
Certification Fee (Certification of Full Payment)	**Php300 per issuance of Certification of full payment**				

*Applicable for Dual Currency Billing product

APPLICANT UNDERTAKING, DECLARATION AND CONSENT

By signing this application or supplementary application below, I am applying for a Bank of Commerce credit card. I acknowledge and agree that by applying, or by calling to request for card activation, or by signing or using my Bank of Commerce credit card, I understand and agree to be governed by the Terms and Conditions Governing the Issuance and Use of Bank of Commerce Credit Card and all future amendments thereto, which can be found at Bank of Commerce website at www.bankcom.com.ph

I warrant that all information given in this application is true and correct. I authorize Bank of Commerce, its branches, units, affiliates, subsidiaries, authorized representatives and accredited third-party partners to verify the information in this application and accompanying documents with the Bureau of Internal Revenue (BIR), any other appropriate government agencies or third parties to establish authenticity of the information declared and documents submitted; to submit, disclose, share and exchange my basic credit data and the information about me to the Credit Information Corporation (CIC), other lenders authorized by the CIC, credit reporting agencies duly accredited by the CIC pursuant to Republic Act No. 9510 and its implementing Rules and Regulations, to other government agencies or third parties to process and evaluate my application for Bank of Commerce Credit Card; or to report/ request reports from consumer credit reporting reference schemes.

Data Privacy Consent

Acknowledging and exercising my rights under Republic Act No. 10173, otherwise known as the Data Privacy Act and its Implementing Rules and Regulations, I hereby give my consent to Bank of Commerce and/or its branches, units, agents, authorized representatives, representative offices, affiliates, subsidiaries, and accredited third-party partners, counterparties, correspondent banks and service providers to process, use and share among themselves the personal information written on the application for credit card/supplementary credit card as well as the information obtained in the course of my transactions with Bank of Commerce, its branches or units in relation to my credit card, or obtained from third parties for purposes of client identification, client risk profiling/assessment, product development and improvement, market research, communications relevant to the life cycle or usage of my credit card, compliance with BSP rules and regulations, anti-money laundering laws, rules and regulations, FATCA, and such other purposes as may be allowed by law.

I also acknowledge that my Personal Data (*refers to ALL types of personal information - personal, sensitive and privileged as defined under the Data Privacy Act and its implementing Rules and Regulations*) shall be retained for a period of not less than five (5) years from the time my credit card is cancelled or terminated as required or allowed under applicable laws, rules and regulations, unless a longer retention is necessary in view of any investigation being conducted, or a criminal, civil, or administrative case filed in a competent judicial or administrative body where I or my account is involved or impleaded as a party to the case or investigation, in which cases, to the extent necessary, my Personal Data shall be preserved beyond five (5) year period until such time that a final judgement has been reached by the judicial or administrative body.

I likewise hereby give my consent to Bank of Commerce and/or its branches, units, agents, authorized representatives, representative offices, affiliates, subsidiaries and accredited third-party partners, counterparties, correspondent banks and service providers to offer especially selected products and services to me through mail, email, fax, SMS, or by telephone to ensure that I will have the opportunity to avail of a wide range of products, services and facilities of Bank of Commerce, its subsidiaries and affiliates, third-party partners, counterparties, correspondent banks and service providers.

The foregoing constitutes my written, express, specific and informed consent for any transfer, disclosure or storage including cloud storage of my name, address, contact details, account balances and numbers and other relevant information by and among Bank of Commerce and/or its branches, units, agents, authorized representatives, representative offices, affiliates, subsidiaries, and accredited third -party partners, counterparties, correspondent banks and service providers.

_____

Applicant's Name and Signature

In the event my application for Bank of Commerce Credit Card is disapproved, Bank of Commerce is under no obligation to provide me with the reason for such a decision, unless required by law or regulation. I understand that the application form and documents submitted to Bank of Commerce will be stored and kept within the retention period prescribed by the Bank and will not be returned for whatever reason.

I hold myself liable for all obligations and liabilities incurred with the use of the Bank of Commerce credit card and supplementary card/s.

I agree and authorize the Bank to send any form of communication associated with its products to me, unless I expressly notify the Bank otherwise.

I hereby and undertake to inform Bank of Commerce immediately of any change in any information or declaration I made herein or in the documents/papers submitted by me. I expect Bank of Commerce to respect my right to access and right to correction, erasure or blocking of my data that are incorrect or inaccurate.

I further understand that Bank of Commerce reserves the right to cancel the Bank of Commerce credit card without prior notice if it is later determined that the information being certified by me is false.

Upon demand by Bank of Commerce for payment of the card purchases, any money, deposit or other property of any kind whatsoever to the credit of my account in the books of Bank of Commerce in transit or in its possession, may, without notice, be applied at its sole discretion, to the full or partial payment of Bank of Commerce credit card purchases. I irrevocably authorize Bank of Commerce, without necessity of prior notice, to apply monies, deposits or other property of any kind whatsoever, to the payment of my indebtedness.

I hereby confirm and certify that I have read and understood the foregoing Applicant Undertaking and Declaration and hereby agreed to be bound thereof.

_____

PRINCIPAL APPLICANT'S SIGNATURE

_____

SUPPLEMENTARY APPLICANT'S SIGNATURE

The corporate logo of San Miguel Corporation is a registered trademark of San Miguel Corporation, and is used under license.

FOR BANK USE ONLY

- ☐ APPLICANT WAS CHECKED AGAINST BANK'S WATCHLIST
- ☐ APPLICANT WAS RISK PROFILED (___ LOW ___ MEDIUM ___ HIGH) CRP NO. _____ RISK SCORE _____
- ☐ APPLICANT IS A BANK OF COMMERCE EMPLOYEE
- ☐ APPLICANT HAS US INDICIA
- ☐ APPLICANT IS RECALCITRANT _____
- ☐ APPLICANT IS PEP / PEP-RELATIVE/ PEP-AFFILIATE
- ☐ APPLICANT IS A BANK OF COMMERCE RELATED PARTY
- ☐ APPLICANT IS A RELATIVE OF A BANK OF COMMERCE EMPLOYEE (UP TO 2ND DEGREE OF CONSANGUINITY / AFFINITY)

NAME OF EMPLOYEE _____ RELATIONSHIP _____

PRINCIPAL CIF NUMBER	SUPPLEMENTARY CIF NUMBER	REFERRED BY	BRANCH / SOURCE CODE	DATE	DOC. IMAGE NO.

FOR SALES AGENCY USE ONLY

AGENCY NAME	AGENT NAME	AGENCY CODE	AGENT CODE

For inquiries, call Bank of Commerce Customer Care Hotline: (02) 8-632-2265
Domestic Toll-Free numbers: (PLDT) 1800-10-982-6000 and (Globe Lines) 1800-8-982-6000
Or send us an email at customerservice@bankcom.com.ph

Bank of Commerce is regulated by the Bangko Sentral ng Pilipinas.
https://www.bsp.gov.ph
Access BSP Online Buddy (BOB) through BSP's official website (Webchat)
Send SMS to 021582277 for Globe subscribers

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