

Project Name		Pagsinag Place			
Project Location		<input type="checkbox"/> Naic, Cavite		<input type="checkbox"/> Santa Maria, Bulacan	
Property		Phase	Block	Lot	Area
Purchase		<input type="checkbox"/> House and Lot		<input type="checkbox"/> Lot Only	
Exterior Home Type		<input type="checkbox"/> Lofted Unit		<input type="checkbox"/> Bungalow	
Financing Scheme: <input type="checkbox"/> Pag-IBIG <input type="checkbox"/> Cash <input type="checkbox"/> Others		Total Contract Price:	Monthly Payment for _____ Years:	Monthly Amortization:	Mortgage Redemption Insurance: <input type="checkbox"/> Fire Insurance:
We'd Like to Know You Better					
Last Name				<input type="checkbox"/> Extension Name	
First Name				<input type="checkbox"/>	
Middle Name				<input type="checkbox"/>	
Residential Mailing Address	No.	Street	Subdivision		
Barangay				City / Municipality	
Province				Birthdate (mm/dd/yyyy)	Age
Civil Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Widow/Widower	<input type="checkbox"/> Separated	Citizenship <input type="checkbox"/> Filipino <input type="checkbox"/> Others: (Please Specify) _____
Mobile No.	Residence Landline		Personal E-Mail Address		
Social Media Account	<input type="checkbox"/> Facebook <input type="checkbox"/> Twitter <input type="checkbox"/> Others: (Please Specify) _____		Account Username / E-Mail Address		
TIN No.	SSS/GSIS No.			PAG-IBIG No.	
CTC / Passport No.	Date Issued (mm/dd/yyyy)			Place Issued	
Employer/ Business Name (If Self-Employed)					
Business Address					
Employment Type	<input type="checkbox"/> Self-Employed	<input type="checkbox"/> Locally Employed	<input type="checkbox"/> OFW	Industry	Monthly Income
Employment Status	<input type="checkbox"/> Regular	<input type="checkbox"/> Contractual	Position Title	Years. In Employment	Company Phone No.
Company Fax No.	Company Email Address				
As Well As Your Spouse/Parent					
Last Name				<input type="checkbox"/> Extension Name	
First Name				<input type="checkbox"/>	
Middle Name				<input type="checkbox"/>	
Residential Mailing Address	No.	Street	Subdivision		
Barangay				City / Municipality	
Province				Birthdate (mm/dd/yyyy)	Age
Civil Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Widow/Widower	<input type="checkbox"/> Separated	Citizenship <input type="checkbox"/> Filipino <input type="checkbox"/> Others: (Please Specify) _____
Mobile No.	Personal E-Mail Address			Residence Landline	
Social Media Account	<input type="checkbox"/> Facebook <input type="checkbox"/> Twitter <input type="checkbox"/> Others: (Please Specify) _____		Account Username / E-Mail Address		
TIN No.	SSS/GSIS No.			PAG-IBIG No.	
CTC / Passport No.	Date Issued (mm/dd/yyyy)			Place Issued	
Employer/ Business Name (If Self-Employed)					
Business Address					
Employment Type	<input type="checkbox"/> Self-Employed	<input type="checkbox"/> Locally Employed	<input type="checkbox"/> OFW	Industry	Monthly Income
Employment Status	<input type="checkbox"/> Regular	<input type="checkbox"/> Contractual	Position Title	Years. In Employment	Company Phone No.
Company Fax No.	Company Email Address				
Kindly List Down Your Dependents					
Names		Birthdate (mm/dd/yyyy)	Age	Relationship	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

I/We hereby attest that all information disclosed in the Purchase Application and all related contracts to be signed in relation to this agreement are true and correct and agree to notify EVERGLOW ENCLAVES INC. of any change in the information contained herein.

IMPORTANT REMINDER

Only pay your Application and Processing Fee (non-refundable) to authorized personnel of Everglow Enclaves and always request for an Acknowledgment Receipt.

Customer Signature over Printed Name Date

Spouse Signature over Printed Name Date

Selling Unit Signature over Printed Name Seller's Code

CORPORATE - CCV TEAM Sales Team Signature over Printed Name Date

A Few Friendly Reminders

1. The SELLER will hold the property selected by the CUSTOMER for a maximum of five (5) calendar days from receipt of this Reservation Application (RA).
2. The SELLER will conduct a thorough background and credit assessment of CUSTOMER account. Failure to pass background and credit assessment shall be grounds for DISAPPROVAL of RA and lifts the holding of the selected property.
3. The CUSTOMER shall be informed of the status of his application within seven (7) calendar days from signing of this RA form.
4. The CUSTOMER will be given thirty (30) calendar days to submit all HDMF Housing Loan documentary requirements after Official Sale.
5. The CUSTOMER should pay the Processing Fee P 10,000 to the authorized representative of the SELLER, upon submission of complete documentary requirements for Official Sale, which are as follows:
 - a. HELP Certificate
 - b. Completely Filled-Out EGE Reservation Agreement Form
 - c. Completely Filled-Out Housing Loan Application (HLA)
 - d. 1 Company ID and 2 Government IDs
 - e. One (1) Month Latest, Original, and HR-Certified Payslip
 - f. Original and Notarized Certificate of Employment with Compensation
 - g. Updated/Latest Employee's Statement of Accumulated Value (ESAV)
 - h. Birth Certificate or Marriage Certificate (if married)
 - i. 4 pcs. of 1x1 Photo with White Background
 - j. Proof of Billing Address
 - k. Signed Meralco Application Form
6. Payments made to agents or brokers shall be the sole and exclusive responsibility and risk of the CUSTOMER. The SELLER will only recognize as valid payments those receipts issued by the SELLER with machine-validation and / or signed by SELLER'S duly authorized representative.
7. The CUSTOMER agrees with the turnover time-line and policy being followed by the SELLER.
 - a. For Customers under Real Estate Mortgage Financing scheme turnover of the LOT or HOUSE and LOT - shall be made after the release of loan proceeds by the financing institution.
8. The CUSTOMER acknowledges that upon execution of the Contract to Sell and Deed of Restrictions, he/she becomes an automatic member of the existing homeowners' association, or if there is none, such homeowners' association as maybe organized in the subdivision project and undertakes to pay such fees/dues incidental thereto.
9. In case of default by the CUSTOMER, a surcharge of five percent (5%) of the total unpaid amount will be charged per month.
10. The CUSTOMER agrees that for every day in the Monthly Balance Payments, interest will be charged based on the outstanding balance computed from the updated Monthly Balance Payment up to the current Monthly Balance Payment due date.
11. The CUSTOMER affirms the right of the SELLER to cancel the Contract based on the following causes:
 - a. Failure to pay the required Cash outlay or miscellaneous expenses and other fees in accordance with the payment schedule.
 - b. Failure to submit additional documents required by the financing institution, Home Development Mutual Fund (HDMF).
 - c. Delay and non-release of loan proceeds by the financing institution due to SELLER for reasons which is / are directly attributable to the CUSTOMER's fault or negligence.
 - d. Submission of falsified documents, misrepresentation and providing false information from the CUSTOMER.
 - e. Failure to inform SELLER within thirty (30) calendar days of any change in the CUSTOMER information.
 - f. Refusal of CUSTOMER to accept the housing unit constructed in accordance with the agreed plans and specifications.
12. **Processing Fee is Non Refundable.** For Buyer initiated cancellations, Cash Outlay/Equity Payments are 50% refundable, subject to deductions of any cost advanced or incurred by the Seller which should have been for the account of the Buyer.

In making this reservation, the Buyer understands that in the construction of the Unit, the SELLER shall have the sole option and right to apply and use any acceptable construction method such as, but not limited to, load bearing construction method and cast-in-place (CIP) construction method: Provided, that the unit is constructed in accordance with the Building Code of the Philippines, and the construction method is undertaken under the rules prescribed by the same Building Code.

CONSENT for RESERVATION AGREEMENT (EcoLow)

We, Everglow Enclaves Inc., respect your privacy and recognize your need for appropriate protection and management of your personal data that you have directly and voluntarily entrusted us. We have developed this Privacy Policy in order to protect your personal data in accordance with the Data Privacy Act of 2012 (DPA), its Implementing Rules and Regulations (IRR), other issuances of National Privacy Commission (NPC) and other relevant laws of the Philippines.

Personal data refers to all types of personal information, sensitive personal information and privileged information. Personal information refers to "any information, whether recorded in a material form or not, from which the identity of an individual is apparent or can be reasonably and directly ascertained by the entity holding the information, or when put together with other information would directly and certainly identify an individual".

This Privacy Policy tells you how we process (meaning, how we collect, use, share, and retain) and protect your personal data. It also tells you what steps you can take if you want us to change how we use your personal data, or if you want us to stop using your personal data.

Why do we collect your personal data?

To enable us to perform processes related with your reservation under the Pasinaya project, it is important that Everglow Enclaves Inc., collects, uses, stores and retains your personal data when it is reasonable and necessary.

In particular, we are using your information to:

- Proceed with your purchase under the Pagsinag project developed by Raemulan Lands, Inc.
- Conduct research and analysis in order to improve customer experience/satisfaction
- Respond to specific complaints, inquiries, requests
- Perform such other processing or disclosure that may be required under law or regulations
- Comply with the requirements of audit and privacy compliance assessments/review

What type of personal data we collect?

We collect information to process with your reservation under the Pasinaya Homes Project. This includes information such as:

The personal data collected from you and that of your spouse includes the following:

- basic personal information such as names, addresses, telephone numbers, and other personal contact details;
- gender, birthplace, citizenship, blood type, height, weight;
- civil status, family background (including parents, sibling/s, spouse, and children's names, birthdays, birthplace, occupation, and current company), religious belief;
- CTC/Passport number, SSS/GSIS number, PAG-IBIG number, Tax Identification Number (TIN), tax status and other government issued IDs;
- employment information (self-employed/locally employed/OFW, nature of business, regular/contractual, position, years in employment); and
- dependents(name, birthdate, age, relationship)

*Please note that you are responsible for ensuring that all personal data you submit is accurate, complete and up-to-date.

How we collect, acquire or generate your data?

We collect your data when you fill-up our forms and disclose your personal information through phone calls, emails, SMSs or verbal communication with our authorized representatives

Who do we share your personal data with?

As a general rule, we are not allowed to share your data to third party, except in limited circumstances as noted below.

By giving your consent, you authorize Everglow Enclaves Inc. to disclose your information to our affiliates or accredited third parties or independent/non-affiliated third parties, whether local or foreign in the following circumstances:

- As necessary for the proper execution of processes related to the declared purpose
- The use or disclosure is reasonably necessary, required or authorized by or under law

This means we might provide information to the following:

- Our affiliates, subsidiaries, partner companies, organizations, or agencies including their sub-contractors or prospective business partners that act as our service providers and contractors;
- Law enforcement and government agencies;
- All third parties, as noted in Annex A, with which we share this information are required to use your personal data in a manner that is consistent with this Privacy Policy.

However, these companies may only use such personal data for the purpose(s) disclosed in this Privacy Policy and may not use it for any other purpose.

How do we protect your personal data?

We take reasonable steps to make sure that your personal data we collect, use or disclose are accurate, complete, and up-to-date. We strictly enforce our Privacy Policy within Everglow Enclaves, Inc. and we have implemented technological, organizational and physical security measures to protect your information we hold from loss, misuse, modification, unauthorized or accidental access or disclosure, alteration or destruction.

We put in effect safeguards such as the following:

- We keep and protect your personal data using secured servers behind a firewall, deploying encryption on computing devices and physical security controls.
- We restrict access to your personal data only to qualified and authorized personnel who hold your personal data with strict confidentiality.
- Any personal data that you provide is initially processed and stored by Everglow Enclaves Inc. Using a secured connection, only authorized Everglow Enclaves Inc. personnel can then access and download your personal data from the system.

This means we might provide information to the following:

- Our affiliates, subsidiaries, partner companies, organizations, or agencies including their sub-contractors or prospective business partners that act as our service providers and contractors;
- Law enforcement and government agencies;
- All third parties, as noted in Annex A, with which we share this information are required to use your personal data in a manner that is consistent with this Privacy Policy.

However, these companies may only use such personal data for the purpose(s) disclosed in this Privacy Policy and may not use it for any other purpose.

How long do we keep your personal data?

The personal data will be kept active in our facilities located in the Philippines, unless you request your personal data to be deleted in the system. If your profile is inactive for 6 months, you will be tagged as inactive. After 10 years from your last transaction date, your personal data will be completely removed from the database. Once deleted, your personal data will no longer be searchable or included in anonymous searches and will be completely removed from all the storage location.

What if there are changes in our Privacy Policy?

From time to time, it may be necessary for Everglow Enclaves Inc. to change this Privacy Policy. If we change our Privacy Policy, we will notify you through email or via registered mail whichever is applicable and will take effect immediately. Rest assured, however, that any changes will not be retroactively applied and will not alter how we handle previously collected personal data without obtaining your consent, unless required by law.

How you can access, correct and update the personal data we have about you?

To exercise your rights which include right to access, modify, erase and object to processing your personal data within a reasonable time after such request or should you have any inquiries, feedbacks on this Privacy Policy, and/or complaints to **Everglow Enclaves Inc.** you may reach us through a written letter or through an email to our Data Protection Officer (DPO).

Our contact details:

Data Protection Officer
37/F Joy-Nostalg Center, ADB Avenue, Ortigas Center, Pasig City
rli.dpo@fortis.com.ph
(02)8570-8888

You may also lodge a complaint before the National Privacy Commission (NPC). For further details, please refer to NPC's website: <https://privacy.gov.ph/mechanics-for-complaints/>.

Our decisions to provide such access or consider any request for correction, erasure and objection to process your personal data as it appears in our records are always subject to any exceptions under applicable and relevant laws and/or the DPA, its IRR and other issuances of NPC.

To cover for the cost of verifying a request for information and locating, retrieving, reviewing and copying any material requested, we may charge you reasonable fees based on administrative costs.

This Privacy Policy was last amended on 6/20/2018

By signing below, you explicitly and unambiguously consent to the collection, processing and storage of your personal information by **Everglow Enclaves Inc.** for the purpose(s) in the foregoing Privacy Policy, and warrant that you have freely and voluntarily signed this Consent and fully understood the contents of the Privacy Policy. Further, you agree to hold Everglow Enclaves, Inc., its directors, officers and employees, free and harmless from any liability, claim or damages of any nature, which may arise from its reliance on this Consent.

✓ SIGNATURE OVER PRINTED FULL NAME

✓ DATE

**Subject to change based on management directives and process improvements.*



HOUSING LOAN APPLICATION

HQP-HLF-068
(V08, 02/2020)

(PRINT ALL ENTRIES IN BLOCK OR CAPITAL LETTERS)

Pag-IBIG MID Number/RTN

Housing Account Number (HAN), if with existing HAN

LOAN PARTICULARS

PURPOSE OF LOAN

- Purchase of fully developed residential lot or adjoining residential lots
- Purchase of a residential house and lot, townhouse or condominium unit, inclusive of a parking slot
- Construction or completion of a residential unit on a residential lot
- Home improvement
- Refinancing of an existing housing loan
- Purchase of residential lot plus cost of transfer of title
- Purchase of residential unit plus cost of transfer of title
- Purchase of a parking slot

WITH EXISTING HOUSING APPLICATION

- YES
- NO

If yes, indicate Housing Application No. _____

DESIRED LOAN AMOUNT (Exclusive of the co-borrower's desired loan amount, if any)

P

DESIRED LOAN TERM (Years)

- 1
- 3
- 5
- 10
- 15
- 20
- 25
- 30

MODE OF PAYMENT

- Salary deduction
- Over-the-Counter
- Post-Dated Checks
- Cash/Check
- Collecting Agent
- Bank
- Developer
- Remittance Center

COLLATERAL

PROPERTY LOCATION (Street, Municipality, Province)

BARANGAY TIMALAN, NAIC, CAVITE

TYPE OF PROPERTY

- Rowhouse
- Single Detached
- Townhouse
- Single Attached
- Condominium
- Duplex

NAME OF DEVELOPER/REGISTERED TITLE HOLDER

RAEMULAN LANDS, INC.

DESCRIPTION OF IMPROVEMENTS

EXISTING

PROPOSED

TCT/OCT/CCT NO.

TAX DECLARATION NO.

LOT/UNIT NO.

BLOCK/BLDG NO.

No. of STOREYS

2

2

IS PROPERTY PRESENTLY MORTGAGED?

- YES
- NO

LAND AREA/FLOOR AREA

SQM

AGE OF HOUSE (For Purchase of a Residential Unit)

NEW

TOTAL FLOOR AREA

36

SQM

SQM

IS THE PROPERTY AN OFFSITE COLLATERAL? YES NO

If yes, use separate sheet for the offsite collateral details

REASONS FOR USE OF OFFSITE COLLATERAL

BORROWER'S DATA

LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	<input checked="" type="checkbox"/> CITIZENSHIP	<input checked="" type="checkbox"/> DATE OF BIRTH (mm/dd/yy)	<input checked="" type="checkbox"/> SEX
					<input type="checkbox"/> M <input type="checkbox"/> F	
PERMANENT HOME ADDRESS Unit/Rom No., Floor Building Name Lot No., Blk No., Phase No., House No. Street Name						<input checked="" type="checkbox"/> MARITAL STATUS
						<ul style="list-style-type: none"> <input type="checkbox"/> Single/Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Annulled <input type="checkbox"/> Legally Separated <input type="checkbox"/> Widow(er)
						ATTACH HERE 1"X1" ID PHOTO OF APPLICANT
PRESENT HOME ADDRESS Unit/Rom No., Floor Building Name Lot No., Block No., Phase No., House No. Street Name						BORROWER'S CONTACT DETAILS (Indicate country code if abroad) COUNTRY + AREA CODE TELEPHONE NO. Home
						<input type="text"/> Cell Phone <input type="text"/> Email Address <input type="text"/>
HOME OWNERSHIP <ul style="list-style-type: none"> <input type="checkbox"/> Owned <input type="checkbox"/> Company <input type="checkbox"/> Living w/ relatives/parents <input type="checkbox"/> Mortgaged <input type="checkbox"/> Rented at P /mo. 						<ul style="list-style-type: none"> <input checked="" type="checkbox"/> YEARS OF STAY IN PRESENT HOME ADDRESS <input checked="" type="checkbox"/> SSS/GSIS ID No.
						PREFERRED TIME TO BE CONTACTED (For Employer)
EMPLOYER/BUSINESS NAME (If self-employed)						<input checked="" type="checkbox"/> TIN
EMPLOYER/BUSINESS ADDRESS Unit/Rom No., Floor Building Name Lot No., Block No., Phase No., House No. Street Name						OCCUPATION <ul style="list-style-type: none"> <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed
						EMPLOYER'S CONTACT DETAILS (Indicate country code if abroad) COUNTRY + AREA CODE TELEPHONE NO. Business (Direct Line)
						<input type="text"/> Business (Trunk Line) <input type="text"/> Employer/Business Email Address <input type="text"/>
INDUSTRY <ul style="list-style-type: none"> <input type="checkbox"/> Accounting <input type="checkbox"/> Activities of Private Households as Employer's & Undifferentiated Production Activities of Private Households <input type="checkbox"/> Agriculture, Hunting, Forestry & Fishing <input type="checkbox"/> Basic Materials <input type="checkbox"/> Business Process Outsourcing (BPO) <input type="checkbox"/> Construction <input type="checkbox"/> Education & Training <input type="checkbox"/> Electricity, Gas and Water Supply <input type="checkbox"/> Extra-Territorial Organization & Bodies <input type="checkbox"/> Financial Services/ Intermediation <input type="checkbox"/> HR/Recruitment <input type="checkbox"/> Health and Social Work; Health and Medical Services <input type="checkbox"/> Life Sciences <input type="checkbox"/> Management <input type="checkbox"/> Manufacturing <input type="checkbox"/> Media <input type="checkbox"/> Mining and Quarrying <input type="checkbox"/> Other Community, Social & Personal Service Activities <input type="checkbox"/> Public Administration & Defense; Compulsory Social Security <input type="checkbox"/> Technology <input type="checkbox"/> Transport, Storage and Communications <input type="checkbox"/> Travel and Leisure <input type="checkbox"/> Wholesale & Retail Trade; Repair of Motor Vehicles, Motorcycles, Personal & Household Goods 						PREFERRED MAILING ADDRESS <ul style="list-style-type: none"> <input type="checkbox"/> Present Home Address <input type="checkbox"/> Employer/Business Address <input type="checkbox"/> Permanent Home Address
						<input checked="" type="checkbox"/> YEARS IN EMPLOYMENT/ BUSINESS
						NO. OF DEPENDENT/S

SPOUSE'S PERSONAL DATA

LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	Pag-IBIG MID NO./RTN
CITIZENSHIP <input checked="" type="checkbox"/> DATE OF BIRTH (mm/dd/yy) <input type="checkbox"/> TIN				
EMPLOYER/BUSINESS NAME (If self-employed)				
YEARS IN EMPLOYMENT/ BUSINESS				
EMPLOYER/BUSINESS ADDRESS Unit/Rom No., Floor Building Name Lot No., Block No., Phase No., House No. Street Name				
OCCUPATION <ul style="list-style-type: none"> <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed 				
POSITION & DEPARTMENT <input checked="" type="checkbox"/> YEARS IN EMPLOYMENT/ BUSINESS				
BUSINESS TEL. NO.				
INDUSTRY <ul style="list-style-type: none"> <input type="checkbox"/> Accounting <input type="checkbox"/> Activities of Private Households as Employer's & Undifferentiated Production Activities of Private Households <input type="checkbox"/> Agriculture, Hunting, Forestry & Fishing <input type="checkbox"/> Basic Materials <input type="checkbox"/> Construction <input type="checkbox"/> Business Process Outsourcing (BPO) <input type="checkbox"/> Construction <input type="checkbox"/> Education & Training <input type="checkbox"/> Electricity, Gas and Water Supply <input type="checkbox"/> Extra-Territorial Organization & Bodies <input type="checkbox"/> Financial Services/ Intermediation <input type="checkbox"/> HR/Recruitment <input type="checkbox"/> Health and Social Work; Health and Medical Services <input type="checkbox"/> Life Sciences <input type="checkbox"/> Management <input type="checkbox"/> Manufacturing <input type="checkbox"/> Media <input type="checkbox"/> Mining and Quarrying <input type="checkbox"/> Other Community, Social & Personal Service Activities <input type="checkbox"/> Public Administration & Defense; Compulsory Social Security <input type="checkbox"/> Technology <input type="checkbox"/> Transport, Storage and Communications <input type="checkbox"/> Travel and Leisure <input type="checkbox"/> Wholesale & Retail Trade; Repair of Motor Vehicles, Motorcycles, Personal & Household Goods 				

BANK ACCOUNTS (Indicate your 3 most active)

BANK	BRANCH/ADDRESS	TYPE OF ACCOUNT	ACCOUNT NO.	DATE OPENED	AVE. BALANCE

CREDIT CARDS OWNED (Indicate your 3 most active)

ISSUER NAME	CARD TYPE (e.g. Visa/Mastercard)	CARD EXPIRY (mm/yyyy)	CREDIT LIMIT

REAL ESTATE OWNED

LOCATION	TYPE OF PROPERTY	ACQUISITION COST	MARKET VALUE	MORTGAGE BALANCE	RENTAL INCOME

OUTSTANDING CREDITS/LOAN AVAILMENTS

Creditor & Address	Security	Type	Maturity Date
		Amount/Balance	Mo. Amortization
Creditor & Address	Security	Type	Maturity Date
		Amount/Balance	Mo. Amortization
Creditor & Address	Security	Type	Maturity Date
		Amount/Balance	Mo. Amortization

MISCELLANEOUS

(Answer the following questions with YES or NO. If your answer is YES, please elaborate the details as required)

Are there past or pending cases against you? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, please indicate the nature, plaintiff, amount involved and the status.
Do you have past due obligations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, please indicate the creditor's name, nature, amount involved and due date.
Was your bank account ever closed because of mishandling or issuance of bouncing checks? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, please indicate the bank's name, nature amount and date.
Have you ever been diagnosed, treated or given medical advice by a physician or other health care provider? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, please indicate the condition/diagnosis.

LOAN AND CREDIT REFERENCES

BANK/FINANCIAL INSTITUTION	ADDRESS	PURPOSE	SECURITY	HIGHEST AMOUNT OWED	PRESENT BALANCE	DATE OBTAINED	DATE FULLY PAID

TRADE REFERENCES (For Self-Employed Only)

NAME OF SUPPLIER	ADDRESS	TEL. NO.

CHARACTER REFERENCES

NAME	ADDRESS	TEL. NO.

SELLER'S DATA

LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	Pag-IBIG MID NO./RTN	TIN
Unit/Room No., Floor	Building Name	Lot No., Blk No., Phase No., House No.	Street Name	CONTACT NUMBER	
Subdivision	Barangay	Municipality/City	Province and State Country (if abroad)	ZIP Code	EMAIL ADDRESS

SOURCE OF Pag-IBIG FUND HOUSING LOAN INFORMATION

- TV Ad Radio Ad Pag-IBIG Fund Personnel Flyer/Poster/Brochure Employer Newspaper/Magazine Ad
 Website Agency Pag-IBIG Fund Branch Real Estate Developer Seller of the Property Others (pls. specify) _____

CERTIFICATION

I/We certify that the foregoing information/statement is to my/our knowledge, true, correct, complete, and updated. The signature/s appearing above my/our printed name/names below is/are genuine.

I/We authorize 1) Pag-IBIG Fund or its duly authorized representative to verify necessary information or data (i.e., certificate of employment, pay slips and income tax return) with the concerned government agencies or third parties including banks and other financial institutions from whom Pag-IBIG Fund had obtained information; to regularly submit and disclose my/our credit data (as defined under Republic Act No. 9510 and its Implementing Rules and Regulations) to Credit Information Corporation (CIC) as well as any updates or corrections thereof; and to send me/us updates about my/our housing loan application/account via SMS/text, email, mail or other available means of communication; and 2) CIC to share my/our credit data with accessing entities, special accessing entities, outsource entities and data subjects, in accordance with the Implementing Rules and Regulations of Republic Act No. 9510.

I/We authorize Pag-IBIG Fund to share my/our personal information and other details of my/our loan account with other government agencies and third parties, as may be necessary in the management of my/our accounts and for collection purposes, subject to the limits under Republic Act No. 10173 (Data Privacy Act of 2012), and its Implementing Rules and Regulations. Further, I/we promise to notify Pag-IBIG Fund of any amendments or changes in my/our personal information indicated herein.

I/We hereby waive confidentiality rules and laws as applicable to establish correctness, validity, and authenticity of documents that would help facilitate the processing and evaluation of my/our application including the relevant employment/income information that shall be provided by my/our employer.

I/We hereby agree that any misrepresentation of a material fact is a ground for disapproval of the application, cancellation of the loan, and shall be a cause for the total outstanding obligation to be due and demandable and shall be subject to other sanctions provided in existing Pag-IBIG Fund guidelines. I/We agree to notify Pag-IBIG Fund of any material change affecting the information contained herein. I/We agree that all information obtained by Pag-IBIG Fund shall remain its property whether or not the loan is granted.

I/We further agree to be bound by the current and general policies of Pag-IBIG Fund and those that the Pag-IBIG Fund may adopt in the future, that may have relation to or in any way affect my/our loan.

I/We understand that the processing/service/filing fee, notarial and all other fees pertaining to the registration of mortgage on property shall be for my/our account.

 SIGNATURE OVER PRINTED NAME OF BORROWER

DATE

 SIGNATURE OVER PRINTED NAME OF SPOUSE

DATE



AUTHORIZED REPRESENTATIVE INFORMATION SHEET

(PRINT ALL ENTRIES IN BLOCK OR CAPITAL LETTERS)

AUTHORIZED REPRESENTATIVE'S DATA

LAST NAME	FIRST NAME	NAME EXTENSION	MIDDLE NAME	ATTACH HERE 1"X1" ID PHOTO OF APPLICANT
RELATIONSHIP TO THE MEMBER-APPLICANT/BORROWER/BUYER/SELLER <input type="checkbox"/> Consanguinity/Affinity _____ <i>(Please indicate relationship to Member-applicant/Borrower/Co-Borrower/Buyer/Seller)</i> <input type="checkbox"/> Attorney-In-Fact to _____ <i>(Please indicate name of Member-applicant/Borrower/Co-Borrower/Buyer/Seller)</i>		DATE OF BIRTH (mm/dd/yy)	CITIZENSHIP	
EE SSS/GSIS ID No.	TIN	SEX <input type="checkbox"/> M <input type="checkbox"/> F	MARITAL STATUS <input type="checkbox"/> Single/Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Widow(er) <input type="checkbox"/> Legally Separated <input type="checkbox"/> Annulled	AUTHORIZED REPRESENTATIVE'S CONTACT DETAILS <i>(Indicate country code if abroad)</i> COUNTRY + AREA CODE TELEPHONE NO.
PERMANENT HOME ADDRESS Unit/Room No., Floor Building Name		Lot No., Blk No., Phase No., House No.	Street Name	
Subdivision	Barangay	Municipality/City	Province and State Country <i>(if abroad)</i>	ZIP Code
PRESENT HOME ADDRESS Unit/Room No., Floor Building Name		Lot No., Block No., Phase No., House No.	Street Name	Home Cell Phone Email Address
Subdivision	Barangay	Municipality/City	Province and State Country <i>(if abroad)</i>	

MISCELLANEOUS

(Answer the following questions with YES or NO. If your answer is YES, please elaborate on the details as required)

Have you ever been assigned as Pag-IBIG Fund's authorized housing loan representative in the past? Yes No
If yes, please indicate the previous number of housing loan accounts you have represented.

Are you being compensated by the Housing Loan Applicant as Attorney-in-fact? Yes No
If Yes, please indicate the creditor's name, nature and amount involved.

Are there past or pending cases against you? Yes No
If Yes, please indicate the nature, plaintiff, amount involved and the status.

CHARACTER REFERENCES

NAME	ADDRESS	TEL. NO.

CERTIFICATION

I hereby certify that the foregoing information/statement is to my knowledge, true, correct, complete, and updated. The signature appearing above my printed name below is genuine.

I authorize Pag-IBIG Fund to share my personal information with other government agencies and third parties, as may be necessary in the management of his/her/their account/s, subject to the limits under Republic Act No. 10173 (Data Privacy Act of 2012), and its Implementing Rules and Regulations. Further, I promise to notify Pag-IBIG Fund of any amendments or changes in my personal information indicated herein.

I hereby certify that I do not represent a counter party in any transaction related to Housing Loan application, and that I am not an attorney-in-fact or employee of a vendor/real estate broker representing the vendor or has business interest for a vendor/contractor/broker, etc., that may be engaged in the procurement of the loan with Pag-IBIG Fund; and if I do, I must fully disclose such interests in the form.

I hereby state whether I am compensated/not compensated by the Housing Loan Applicant as Attorney-in fact.

I hereby agree that any misrepresentation of a material fact is a ground for disapproval of the application, cancellation of the loan, and shall be a cause for the total outstanding obligation to be due and demandable and shall be subject to other sanctions provided in existing Pag-IBIG Fund guidelines. I agree to notify Pag-IBIG Fund of any material change affecting the information contained herein. I agree that all information obtained by Pag-IBIG Fund shall remain its property whether or not the loan is granted.

I further agree to be bound by the current and general policies of Pag-IBIG Fund and those that the Pag-IBIG Fund may adopt in the future, that may have relation to or in any way affect his/her/their loan.

I understand that the processing/service/filing fee, notarial and all other fees pertaining to the registration of mortgage on property shall be for his/her/their account.

SIGNATURE OVER PRINTED NAME OF AUTHORIZED REPRESENTATIVE

DATE

THIS FORM CAN BE REPRODUCED. NOT FOR SALE.

DATE : _____

TO : _____

(Broker's Name)

RE : LETTER OF INTENT (LOI)

X _____ X

Dear Sir/ Madam:

I/we learned that Raemulan Lands, Inc. will launch a residential project located in

Please be informed that I/We am/are very much interested on this project, and I/We would like to be given priority in the event that you will begin selling units in the project.

In case I proceed with buying a unit in the project, I also understand that:

1. Loanable amount for housing loan is subject to final assessment by the Pag-IBIG or financial institution. Hence, any additional equity or amount not covered by the approved housing loan shall be paid by me.
2. The Developer reserves the right to change Price without prior Notice.

Thank you,

Buyer's Name and Signature

**AUTHORIZATION TO CONDUCT CREDIT/
BACKGROUND INVESTIGATION**

Date

Dear Sir/Madam:

I hereby authorize Pag-IBIG Fund or its duly authorized representative to validate/check with the following institutions in connection with my/our application for housing loan:

- Company/Employer
- BIR
- Bank (*in case income is sourced from foreign remittances, pension, etc*)
- Credit Cards Owned (*if any*)
- DTI (*Business Name*)
- LGU (*Mayor's Permit/Business Permit*)
- LTFRB (*Transport Franchise*)
- Others: _____

Thank you.

Very truly yours,

✓ _____
Signature of Borrower
Over Printed Name

(August 2012)



Date: _____

I /We Certify that the Signature appearing is genuine.

BUYER SIGNATURE

1	_____	1	_____
2	_____	2	_____
3	_____	3	_____
4	_____	4	_____
5	_____	5	_____
6	_____	6	_____
7	_____	7	_____
8	_____	8	_____
9	_____	9	_____
10	_____	10	_____

SPOUSE SIGNATURE

SIGNATURE OVER PRINTED NAME
BUYER

SIGNATURE OVER PRINTED NAME
SPOUSE



RESIDENTIAL HOME – WORK PLACE ADDRESS SKETCH

Address :

Buyer's Signature Over Printed Name

ExtraOrdinary
ENCLAVES

COMPUTATION SHEET

BUYER'S NAME :	
PROJECT :	SCHEME :
PHASE :	HOUSE MODEL :
BLOCK :	FLOOR AREA :
LOT :	LOT AREA :

Total Contract Price:	Php _____
Less: Add'l. Cash Outlay: (for special units)	_____
Loan Value (HDMF):	Php _____
Miscellaneous Fees:	_____
Processing Fee: (Hdmf Filing & Inspection Fee)	Php _____
Move in Fee: (To be pay off prior to unit acceptance)	_____
Total	Php _____

SCHEDULE OF PAYMENTS FOR ADDT'L CASH OUTLAY (MAX OF 6 MONTHLY INSTALLMENT)				
Particulars	Mode of Payment	Bank	Due Dates	Amount
Total Cash Outlay				Php _____

PAG-IBIG LOAN SAMPLE COMPUTATION				
Loan Value	Interest Rate	Loan Term	M. A.	Required NDI
<i>Note: Mri & fire insurance not included in this computation</i>				

BUYER'S INCOME INFORMATION				
Basic Salary	:	Php	_____	
Allowance	:		_____	
Overtime Pay	:		_____	
Gross Pay	:	Php	_____	
Other Income	:		_____	
Total Gross Pay	:	Php	_____	
Deductions:				
Phic	:		_____	
Pag-ibig	:		_____	
Sss	:		_____	
Tax	:		_____	
Net Pay	:	Php	_____	

Prepared by: _____ Conferme: _____

Checked/Reviewed by: _____ Principal Buyer _____

Approved by: _____



Application for Registration

BIR Form No.
1904
January 2000 (ENCS)

For One-time Taxpayer and Person Registering
under E.O. 98 (Securing a TIN to be able to transact
with any government office)

New TIN to be issued, if applicable
(To be filled up by BIR)

Fill in all appropriate white spaces. Mark all appropriate boxes with an "X".

1 Taxpayer Type	<input type="checkbox"/> One-Time Taxpayer	2 Classification	<input type="checkbox"/> Individual	3 Date of Registration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> E.O. 98		<input type="checkbox"/> Non-individual	(To be filled up by BIR)	(MM / DD / YYYY)			

Part I		Taxpayer Information						
4 TIN	► <input type="checkbox"/> 0 0 0				5 RDO Code	<input type="checkbox"/>	6 Sex	<input type="checkbox"/> Male
(For Taxpayer w/ existing TIN)					(To be filled up by BIR)			<input type="checkbox"/> Female

7 Taxpayer's Name (Last Name, First Name, Middle Name, if individual/Registered Name, if non-individual)	► <input type="text"/>							
--	------------------------	--	--	--	--	--	--	--

8 Civil Status	<input type="checkbox"/> Single/Widow/Widower/Legally Separated (No dependents)	9 Spouse Information		
	<input type="checkbox"/> Head of the Family	9A Spouse Taxpayer Identification Number		
	<input type="checkbox"/> Single with qualified dependent	<input type="checkbox"/>		
	<input type="checkbox"/> Widow/Widower with qualified dependent	<input type="checkbox"/>		
	<input type="checkbox"/> Legally separated with qualified dependent	<input type="checkbox"/>		
	<input type="checkbox"/> Benefactor of a qualified senior citizen (RA No. 7432)	<input type="checkbox"/>		
	<input type="checkbox"/> Married	Last Name	First Name	Middle Name

10 Date of Birth / Date of Organization	<input type="checkbox"/>	11 Telephone Number	12 Municipality Code (To be filled up by BIR)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(MM / DD / YYYY)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13 Local Address (Please indicate complete address)	14 Zip Code
<input type="text"/>	<input type="checkbox"/>

15 Foreign Address (Please indicate complete address)	16 Zip Code
<input type="text"/>	<input type="checkbox"/>

17 Contact Person/Accredited Tax Agent (if different from taxpayer)	18 Telephone Number
<input type="text"/>	<input type="checkbox"/>

19 ► One-Time Transactions (To be filled up by one-time taxpayer only)	<input type="checkbox"/> A Sale, Assignment and / or Disposal of Shares of Stocks	<input type="checkbox"/> B Sale, Assignment and / or Disposal of Real Property(ies) classified as Capital Asset	<input type="checkbox"/> C Sale, Assignment and / or Disposal of Real Property(ies) classified as Ordinary Asset
	<input type="checkbox"/> D Donation of Properties	<input type="checkbox"/> E Transfer of Properties by Succession (Death)	<input type="checkbox"/> F Others (Specify) <input type="text"/>

20 ► Tax Types (Choose only the tax types that are applicable to you)	FORM TYPE (To be filled up by the BIR)	ATC (To be filled up by the BIR)
<input type="checkbox"/> Withholding Tax	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Capital Gains Tax - Real Property	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Capital Gains Tax - Stocks	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Documentary Stamp Tax	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Donor's Tax	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Estate Tax	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Miscellaneous Tax (Specify) <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Non-Taxable (under EO 98) <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Others (Specify) <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

21 Declaration	Stamp of Receiving Office and Date of Receipt
I declare, under the penalties of perjury, that this form has been made in good faith, verified by me and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof.	
TAXPAYER/AUTHORIZED AGENT (Signature over printed name)	TITLE/POSITION OF SIGNATORY
Attachments complete? (To be filled up by BIR)	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

ATTACHMENTS: (Photocopy only)

- For Payor of Capital Gains Tax (Stock, Real Estate)
 - Birth Certificate or any document showing name, address and birth date of taxpayer applicant
 - Deed of Sale
- For Payor of Transfer Tax
 - Birth Certificate or any document showing name, address and birth date of the taxpayer (donor)
 - Deed of Donation
- Estate Tax
 - Death Certificate

- For Payor of Final Tax on Winnings
 - Certification from awarding company/person
- For Vehicle Registrants
 - Birth Certificate or any document showing name, address and birth date of the applicant
 - Cash Invoice or Official Receipt or Deed of Sale
- For Other Applicants
 - Birth Certificate or any document showing name, address and birth date of the applicant

POSSESSION OF MORE THAN ONE TAXPAYER IDENTIFICATION NUMBER (TIN) IS CRIMINALLY PUNISHABLE PURSUANT TO THE PROVISIONS OF THE NATIONAL INTERNAL REVENUE CODE OF 1997, AS AMENDED.

REPUBLIC OF THE PHILIPPINES) S.S.
CITY OF _____)

AFFIDAVIT OF ELIGIBILITY

I, _____, of legal age, married/single, Filipino and a resident of _____, after having been sworn in accordance with law hereby declare that;

1. I possess the following qualifications, as a socialized housing beneficiary under Section 5(A) of Bureau of Internal Revenue (BIR), Revenue Regulations (RR) No. 11-97, to wit:
 - a. That I am a Filipino Citizen;
 - b. That I am underprivileged and homeless citizen, as defined in Section 3(t) of the Act and Section 2(r) of these Regulations;
 - c. That I do not own any real property, whether in the urban or rural areas; and
 - d. I am not a professional squatter or a member of squatting syndicate.
2. This Affidavit of Eligibility shall be deemed as compliance under the Certificate of Tax Exemption of Raemulan Lands, Inc. for Pasinaya Homes _____ located at Brgy. Sabang Naic Cavite;
3. I am executing this Affidavit to attest to the truth of the foregoing.

IN WITNESS WHEREOF, I have hereunto affixed my signature below this

at _____



AFFIANT

SUBSCRIBED AND SWORN to me this _____ day of _____, affiant
exhibiting to me his/her _____ issued on
_____ at _____.

Doc No. _____;
Page No. _____;
Book No. _____;
Series of _____.

CUSTOMER'S SERVICE APPLICATION WARRANTY

Pangalan ng Customer : _____

Pangalan ng Authorized Representative, kung mayroon _____

Lokasyon ng Serbisyo (Service Address) _____

Serbisyo ng Kuryente/Aplikasyon Bilang (Service ID No./Application No.): _____

Sa pamamagitan at bisa ngkasulatang ito, aking ginagarantiya at sinisiguro na ako ay may karapatang tumira at gamitin angbahay/gusali na pagkakabitang kuryente at ako ay may karapatang gumamit ng nasabing kuryente.

Pahihintulutan ko ang MERALCO na pumasok sa nasabing bahay/gusali upang itayo / ilagay/ kabit ang anumang pasilidad para sa serbisyo ng kuryenteng aking kailangan;

Aking sisiguruhin na hindi madadamay, at aking ipagtatanggol at pinapalaya, ang MERALCO, ang mga direktor, opisyal, empleyado, ahente o mga representante nito sa anumang kaso, habla, demanda o reklamo na maaaring isampa ng ibang tao dahil sa aking pagmamay-ari o pag-gamit ng nasabing ari-arian, kasama na rito ang pagpapakabit ko at pagpapakinabangngserbisyo ngkuryente;

Hindi ako tututol sa pagkakataon na kailangan ang pagputol ng aking serbisyo ngkuryente, pag-alis ng mga linya, metro at iba pang pasilidad ng kuryente o pagwakas ng kasunduan ng serbisyo ng kuryente sa ilalim ng nabanggit na SIN/Application, matapos akong bigyan ng kaukulang paunawa ng Manila Electric Company o ng mga kinatawan nito, sa aking paglabag sa Customer's Service Application warranty na ito o sa pangayari ng anuman sa mga sumusunod:

1. Kung ang may-ari ng lupa/gusali/dan, kung saan ang serbisyo ngkuryente ay ipinagkaloob, ay humiling na ipatanggal ang serbisyo ngkuryente o wakasan ang kasunduan sa serbisyo ngkuryente;
2. Kung ang pagputol o pagtanggal ng serbisyo ng kuryente ay alinsunod sa batas o alltuntunin, o ayon sa utes ng hukuman o sangay ng pamahalaan;
3. Kung may sakuna o kailangan unahan ang kaligtasan ng mga tao;
4. Kung may nakakabit na linya ng kuryente mula sa aking bahay upang bigyan ng serbisyo ang ibang bahay ("flying connection");
5. Kung ang aking metro ng kuryente ay inilipat nang waiang pahintulot o di kaya ang linya ngkuryente ay inilipat papunta sa isang serbisyo;
6. Kung ang anumang papeles, dokumento o kaalaman na aking ibinigay sa Meralco kaugnay sa aking aplikasyon sa serbisyo ng kuryente ay natagpuang mapanlinlang, huwad o daya;
7. Kung ako ay lumabag sa anumang mga gawa na ipinagbabawal ayon sa nasasaad sa Sec on 4(a) ng R.A. 7832 o mas kilala sa "Anti-Pilferage Act of 1994" at ng Implementing Rules and Regulation nito;
8. Kung ako ay nagkulang sa pagbigay sa Meralco ng mga kailangang papeles o dokumento sa loob ng isang daan at dalawampung (120) araw mula sa araw na nabigyan ako ng serbisyo ng kuryente o kapag hinigi ang mga ito ng Meralco; o di kaya
9. Kung ako ay lumabag sa kasunduan sa pagbibigay ng serbisyo ng kuryente ng Meralco.

Kusang loob kong nilagdaan ngayong _____ araw ng buwang _____ taong _____ sa _____.

LAGDA SA IBABAW NG PANGALAN

Nilagdaan sa harap nina

Ang Pagpapaubaya na ito ay hindi maaaring maging hadlang sa Meralco upang singilin ang anumang pagkakautang ng Applicant/Customer. Anumang pagkaantala o kaluwagan ng Meralco a pagpapatupad, maging sa kabuuan o bahagi lang, ng kahit anong karapatan, lunas, o pananagutan ng Applicant/Customer na Ibinigay dito at may kaugnayan sa Contract For Electric Service ay hindi maaaring batayan upang pagpaubaya ang kahit anong karapatan, lunas o pananagutan na nabanggit.

AUTHORIZATION
Re: Service Application No. _____

Date _____

Manila Electric Company
(Name of) Business Center
(Address)

Gentlemen:

I hereby authorize _____ to act as my representative in connection with my application for electric service/sat _{LOCATION}_ {the "Application"} and, for such purpose:

1. to execute or sign any and all of the following documents on my behalf:

#	Requirement/s
1	
2	
3	
4	
5	

2. to transact with your Company, submit any and all required papers or documents and pay all necessary fees and deposits in connection with and to facilitate the processing of my application; AND
3. to do any and all acts necessary for the processing of my Application.

By executing this Authorization, I hereby affirm and agree to be bound by the representations, warranties and actions of my representative and to comply with the terms and conditions for the provision of electric service at the address aforementioned.

In case there are changes in the foregoing authorization, I undertake to immediately notify Meralco of any and all such change/s; and I will defend, protect, indemnify and hold Meralco and its officers, directors, representatives and agents free and harmless from, and against any and all, delays, losses, liabilities, demands and claims of whatever nature and kind, arising out of my failure to make such notification.

For your reference, attached are photocopies of my ID and that of my representative.

Applicant Signature Over Printed Name

Authorized Representative Signature Over Printed Name

DATA PRIVACY CONSENT STATEMENT

I hereby give consent to, and authorize Manila Electric Company (MERALCO), its directors, officers, employees, authorized representatives or third parties, to collect, record, store, use, disclose, share, update, modify, block or erase, monitor, or otherwise process (collectively, "Process/Processing") my Personal Data, in accordance with R.A. No. 10173 "The Data Privacy Act of 2012" and its implementing rules and regulations and any of its amendments. These Personal Data refer to all personal, sensitive or confidential information provided or to be provided to Manila Electric Company (MERALCO), its directors, officers, employees, authorized representatives including but not limited to the following:

1. Information given when applying for service, such as my name, address, phone number, email address, Tax Identification Number (TIN), evidence of authority to occupy, and, if applicable, details of my authorized representative;
2. Billing and payment information used to pay my electric consumption. However, details of the payment instrument (like prepaid card, -debit card, credit card) used to pay my bills via Meralco Online are captured and processed by the payment gateway service provider;
3. Information to determine eligibility to participate in certain energy programs or services;
4. Information I filled out in any form on our website or online facilities, such as, when I wish to contact Meralco to lodge my concerns, to register at Meralco Online, to avail of its on-line application, outage notifications, and billing and/or payment services;
5. Information given when I communicate with MERALCO and/or any of its representatives (e.g., Call Center Representatives, etc.);
6. Responses provided when I or my representative participate in our customer surveys;
7. Information provided for verification purposes (e.g., to facilitate refunds or to avail of zero-rated VAT transactions);
8. Any other information voluntarily provided for any legitimate purpose declared at point of collection of such information.

I agree that these data shall be used and/or processed for any legitimate purpose, including but not limited to the following:

- a. Notification on the service application, bill payments, outages, marketing or promotional information, updates, alerts, or other concerns;
- b. Supply or continuous improvement of the electric service as well as management of the service account such as payment options and - eligibility for refunds;
- c. Response to service inquiry, concern or complaint;
- d. Verification of identity whenever accessing the account through the various customer engagement channels (e.g., e-mail, website, mobile application, via phone call, walk-in);
- e. Conduct of research involving the business of MERALCO or electric distribution services, in general;
- f. Protection of my interest and/or that of other MERALCO customers; or
- g. Compliance by MERALCO with its obligations under its contract, applicable laws and regulations or pursuant to lawful orders of competent authorities or for public order and safety or in cases of emergencies

I acknowledge that I am afforded certain rights such as the right to verify, correct or modify, or remove these personal data or withdraw my consent and/or edit my consent preferences at any time through a written request to MERALCO's authorized representatives. I hereby agree that said personal data shall not be shared by MERALCO to third parties except to those provided above, or in special circumstances where I have given my specific consent or as allowed by pertinent laws, rules, or regulations. I acknowledge that said third parties have been required to abide by the Non-Disclosure Agreement, if applicable, and implement their own data privacy program to secure and keep the subject information confidential in accordance with law.

I hereby warrant that I have read and carefully understood MERALCO's Privacy Policy, stated in <http://www.meralco.com.ph/privacy-policy>, and that I knowingly and voluntarily executed this consent statement in accordance therewith. I confirm that I have obtained prior consent from the registered customer or applicant residential owner or user, company or business I represent and its officers before disclosing their information to MERALCO and in providing this consent in their behalf.

I hereby allow MERALCO, its directors, officers, employees, authorized representatives or third parties to process these personal data from their submission and for the duration of my electric service contract with MERALCO until there are unpaid bills, charges, deposits or refunds on the service account and in case the application does not proceed, the data shall be stored and/or processed only within twelve (12) months from submission or last updating of the data, subject to the retention limits set by applicable laws and regulations. Thereafter, the personal data shall be disposed or discarded in a secure manner that would prevent further processing, unauthorized access, or disclosure to any other party or the public.

Name of Customer Representative

Company/Business Entity

Position

Date

