

EPAYCARD CUSTOMER ACCOUNT OPENING FORM

All fields with (CHECK) are MANDATORY.

ACCOUNT DETAILS			
DATE (MM/DD/YYYY)		BRANCH	CUSTOMER ID NO.
CLIENT TYPE <input type="checkbox"/> New Client <input type="checkbox"/> Existing Client		TYPE OF ACCOUNT Peso Dollar	ACCOUNT NO.
CARDHOLDER DETAILS			
TITLE / SALUTATION	NAME (Last Name, Given Name, Middle Name)		GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female
CIVIL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Married		MOTHER'S MAIDEN NAME (Last name, Given Name, Middle Name)	
BIRTHDATE (MM/DD/YYYY)	PLACE OF BIRTH	CITIZENSHIP/ NATIONALITY Filipino Foreigner Dual Citizen	
MOBILE NO.*	* Your Company's HR Officer has automatically enrolled you in receiving SMS Alerts. Kindly inform them if you want to be removed from this service.		EMAIL ADDRESS:
PRESENT ADDRESS (No. / Street / District / Barangay / City / Town / Province)			ZIP CODE
PERMANENT ADDRESS Same as Present Address			ZIP CODE
SSS NO. / GSIS NO. / TIN	SOURCE OF FUNDS <input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Commission/Fees <input type="checkbox"/> Remittance <input type="checkbox"/> Others		
EMPLOYMENT DETAILS			
COMPANY NAME / BUSINESS NAME (if Self-employed)		POSITION/ DESIGNATION	INDUSTRY
BUSINESS ADDRESS (No. / Street / District / Barangay / City / Town / Province)		ZIP CODE	CONTACT NO. EMAIL ADDRESS
FATCA INFORMATION			
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> I am not a U.S. Person. </div> <div style="border: 1px solid black; padding: 5px;"> I am a U.S. Person.¹ - U.S. Citizen OR - U.S. Resident OR - U.S. Green Card Holder OR - U.S. Passport Holder </div>		<div style="border: 1px solid black; padding: 5px;"> I am not a U.S. Person but with U.S. indicators. U.S. Place of Birth³ U.S. Resident Address / U.S. Mailing Address (including a U.S. post office box)² U.S. Telephone Number² Standing instruction/s to transfer funds to an account maintained in the U.S.² Power of Attorney or signatory authority granted to a person with a U.S. Address² "In-care-of" address or "hold mail" address that is the sole address the Foreign Financial Institution has identified for the account holder² </div>	
DOCUMENTARY REQUIREMENTS (1) Certification, Consent, and Waiver <u>AND</u> Form W-9 (2) Certification, Consent, and Waiver <u>AND</u> Form W-9 <u>OR</u> Form W-8, Form W-8 BEN <u>AND/OR</u> Non-US passport <u>OR</u> government ID evidencing citizenship in another country (3) Certification, Consent, and Waiver <u>AND</u> Form W-9 <u>OR</u> Form W-8, Form W-8 BEN <u>AND/OR</u> Non-US passport <u>OR</u> government ID evidencing citizenship in another country <u>OR</u> Certificate of Loss of Nationality of the US or Form I-407, <u>OR</u> a reasonable explanation of account holder's renunciation of US citizenship <u>OR</u> the reason the account holder did not obtain US citizenship at birth			
CARDHOLDER'S SPECIMEN SIGNATURE			
(Please provide three specimen signatures)			
1)	2)	3)	
CARDHOLDER ATTESTATION			
<p>By my signature herein, I acknowledge that my company's authorized HR representative has discussed and I have read the UnionBank ePaycard Terms and Conditions found in bit.ly/UBPePaycardTCs and the Bank's Privacy Policy found in bit.ly/UBPDataPrivacy and I confirm that I fully understand and agree to abide by the terms stipulated and any future amendments thereto. For Checking Account/s, I agree and undertake not to use cheques, printed or secured from printers, not accredited by your Bank and that I shall be held responsible and liable for any and all losses, damages arising from the violation of this undertaking.</p> <p>I confirm that all information I provided are true and correct. I agree to inform Union Bank of the Philippines should there be any changes to my personal data stated above. I consent to the disclosure of my personal data to UnionBank and other authorized third parties, including subsidiaries and affiliates, of UnionBank to be used for the purpose of processing my application and for the assessment of my compliance with the necessary requirements needed for this application. I understand that my personal information may also be used for review, audit, and reporting to Bangko Sentral ng Pilipinas and other regulators.</p> <p>Ultimately, I hold the Bank free from any liabilities that may arise regarding my account, including those that may arise from the Bank's imposition of restrictions to or closure of my account that may be due to incomplete, inaccurate, and/or outdated information provided by me or my company's HR.</p>			
_____ CARDHOLDER Signature over Printed Name / Date		_____ AUTHORIZED HR REPRESENTATIVE Signature over Printed Name / Date	
FOR BANK'S USE ONLY (to be filled-out by the Sales Representative)			
TYPE OF DEPOSIT	CUSTOMER TYPE	EMPLOYER ID	RM/BM/AO CODE
REMARKS			
IDENTIFIED & SIG. VERIFIED BY / DATE	PROCESSED BY / DATE	APPROVED BY / DATE	APPROVED BY / DATE (FOR EDD)
_____ Signature over Printed Name	_____ Signature over Printed Name	_____ Signature over Printed Name	_____ Signature over Printed Name