Special Assets Management Group			
BUYER'S INFORMATION SHEET			
Instructions: Delase PRINT all entries legibly and check appropriate boxes Delastructions: Please PRINT all entries legibly and check appropriate boxes Delastructions: Delast			
Client Name/Business Name (Last Name, First Name, Middle Name for Individual)			DOSRI: Yes No
Present Address/Principal Place of Business:			
Permanent Address:			
	onomic Activity		Gender: Male Female
Buyer		Tel. No.:	Mobile No.:
Not Engaged in Bus. Partnership/Corp. SEC	C/DTI Reg. No.	Email Address:	
	ionality: Civil Status:	Single Widowed	d No. of Children
	*pls. attach court order	Married Separate	ed* Age/s:
Educational Attainment: Elementary High School	College Post Graduate	Others: please specify	
ID/s Presented: SSS GSIS Driver's License	Passport Others please specify	ID Number:	
CTC No. issued in on			
Employment Employed Self-Employed OFW	For Married Buyers: For purposes of prepar	ing the Deed of Sale, the document	:/s should be in:
Details: Retired Others please Specify	My name (with marital consent)		es as SPOUSES
	OCCUPATION / EMPLOYMEN	JT	
Name of Employer:		Economic Activity	
Office Address:		Tel. No.:	
Occupation/Position:	Employment Status: Permanent	Others please specify	Years w/ Company:
	SPOUSE INFORMATION		
Name (LAST NAME, FIRST NAME, MIDDLE NAME)		Ger	ender: Male Female
Present Address:			I. No.:
Date of Birth: Place of Birth:	Nationality:		obile No.:
TIN Educational Attainment: Elementar			Others: please specify
apony apony			
Employment	Name of Employer:		
Tetired Strict's specify	Office Address:	- 1. A. W. W.	
Occupation/Position:	Tel. No.:	Economic Activity	
Employment Status: Permanent Others please specify	Years w/ Company:	Email Address:	
AUTHORIZED REPRESENTATIVE*			
Name (LAST NAME, FIRST NAME, MIDDLE NAME)			ender: Male Female
Present Address:			I. No.:
Date of Birth: Place of Birth:	Nationality:		obile No.:
TIN Educational Attainment: Elementary			Others: please specify
Employment Employed Self-Employed OFW	Civil Status:	Single Widowed	
Details: Retired Others please specify	*attach court orde		ed* Age/s:
ID/s Presented: SSS GSIS Driver's License Passport Others please ID Number:  *A ttach appropriate written authorization (SPA for individual buyer; Secretary's Certificate/Board Resolution for corporate buyer).			
"A ttacn appropriate written autnorization (эгн тог murvidual buyer,	SOURCE OF FUND	or corporate duyer).	
GROSS MONTHLY INCOME:	BUYER	SPOUSE	TOTAL
Salaries and Allowances	DOTEN	JI OUJL	TOTAL
Business			-
Others (pls. specify):			
TOTAL MONTHLY INCOME	<u>.</u>	-	
CR	REDIT AND BANK REFEREN	CES	
Bank / Financial Institution	Contact Number		e of Account
Do you have any relative working at PNB? Yes No If Ye his/h	res, rher Name:	Branch/Div.	Relationship:
I/WE HEREBY CERTIFY that the above information are true, correct, accurate, and complete. I/WE also authorize PNB to obtain information from my banks,			
employer, and other references listed herein.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		······································
Signature Over Printed Name	Date Signed	Signature Over Printed Name	Data Signed

FOR PNB USE ONLY

Signature/Initial:

Verified by (Emp No.): \_

Verified in OFAC List:

Not Listed

Listed

Date: