

BORROWER'S INFORMATION

Name (Last Name / First Name / Middle Name)		Date of Birth (MM/DD/YYYY)	Age	Place of Birth	Citizenship
Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widow/er <input type="checkbox"/> Separated <input type="checkbox"/> Annulled	No. of Dependents	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Mother's Maiden Name		Landline No.
Present Home Address <input type="checkbox"/> Owned <input type="checkbox"/> Renting for Php _____ <input type="checkbox"/> Living with Relatives <input type="checkbox"/> Mortgaged				Neighborhood <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed	Length of Stay Years ___ Months ___ Zip Code
Permanent Address <input type="checkbox"/> Owned <input type="checkbox"/> Renting for Php _____ <input type="checkbox"/> Living with Relatives <input type="checkbox"/> Mortgaged				Neighborhood <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed	Length of Stay Years ___ Months ___ Zip Code
<i>(If your present and permanent address are one and the same, please fill out the present column and indicate N/A in the permanent column.)</i>					
Educational Attainment <input type="checkbox"/> Elementary <input type="checkbox"/> High School <input type="checkbox"/> Undergraduate <input type="checkbox"/> College <input type="checkbox"/> Vocational <input type="checkbox"/> Post Graduate <input type="checkbox"/> Others _____		E-mail Address		TIN #	GSIS / SSS No.
Spouse's Name (Last Name / First Name / Middle Name)		Date of Birth (MM/DD/YYYY)	Age	Place of Birth	Citizenship

EMPLOYMENT / BUSINESS INFORMATION

Borrower's Employment / Business		Spouse's Employment / Business	
Employment Status <input type="checkbox"/> Employed ○ Private ○ Government <input type="checkbox"/> Self-employed <input type="checkbox"/> Professional _____ <input type="checkbox"/> Unemployed Source of Income: ○ Remittance / Allotment ○ Pension ○ Other Source _____	Position (if employed) <input type="checkbox"/> Skilled <input type="checkbox"/> Staff / Rank and File <input type="checkbox"/> Supervisory <input type="checkbox"/> Management Level <input type="checkbox"/> Executive Status (if employed) <input type="checkbox"/> Permanent <input type="checkbox"/> Special Occupation <input type="checkbox"/> Probationary <input type="checkbox"/> Contractual / Seasonal <input type="checkbox"/> OFW <input type="checkbox"/> Sales w/o Fixed Income	Employment Status <input type="checkbox"/> Employed ○ Private ○ Government <input type="checkbox"/> Self-employed <input type="checkbox"/> Professional _____ <input type="checkbox"/> Unemployed Source of Income: ○ Remittance / Allotment ○ Pension ○ Other Source _____	Position (if employed) <input type="checkbox"/> Skilled <input type="checkbox"/> Staff / Rank and File <input type="checkbox"/> Supervisory <input type="checkbox"/> Management Level <input type="checkbox"/> Executive Status (if employed) <input type="checkbox"/> Permanent <input type="checkbox"/> Special Occupation <input type="checkbox"/> Probationary <input type="checkbox"/> Contractual / Seasonal <input type="checkbox"/> OFW <input type="checkbox"/> Sales w/o Fixed Income
Employer's / Business Name		Employer's / Business Name	
Office / Business Address		Office / Business Address	
Office Landline No. Fax No.		Office Landline No. Fax No.	
Office E-mail Address		Office E-mail Address	
Nature of Work / Business		Nature of Work / Business	
Years in Present Employer Years ___ Months ___	Years in Business Years ___ Months ___	Years in Present Employer Years ___ Months ___	Years in Business Years ___ Months ___
Rank / Position Title		Rank / Position Title	
Previous Employer <i>(if less than 2 years in current employment)</i> Name of Company Length of Stay Years ___ Months ___	Business Information DTI Registration No. Expiry date:	Previous Employer <i>(if less than 2 years in current employment)</i> Name of Company Length of Stay Years ___ Months ___	Business Information DTI Registration No. Expiry date:

BORROWER'S DEPENDENTS

Name	Age	School	Level	Relationship

LOAN DETAILS

Desired Loan Amount: _____	Loan Term:																								
Mode of Loan Release: <input type="checkbox"/> Manager's Check (subject to 3 days clearing time) <input type="checkbox"/> Credit to China Bank Savings account # _____	<table border="1"> <thead> <tr> <th>Please Check</th> <th>Term</th> <th>Effective Yield (per month)</th> <th>Factor Rate</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td>12 months</td> <td>2.73%</td> <td>0.09883</td> </tr> <tr> <td><input type="checkbox"/></td> <td>18 months</td> <td>2.89%</td> <td>0.07206</td> </tr> <tr> <td><input type="checkbox"/></td> <td>24 months</td> <td>2.86%</td> <td>0.05817</td> </tr> <tr> <td><input type="checkbox"/></td> <td>36 months</td> <td>2.92%</td> <td>0.04528</td> </tr> <tr> <td><input type="checkbox"/></td> <td>48 months</td> <td>3.10%</td> <td>0.04033</td> </tr> </tbody> </table> <p><i>(rates are subject to change without prior notice)</i></p>	Please Check	Term	Effective Yield (per month)	Factor Rate	<input type="checkbox"/>	12 months	2.73%	0.09883	<input type="checkbox"/>	18 months	2.89%	0.07206	<input type="checkbox"/>	24 months	2.86%	0.05817	<input type="checkbox"/>	36 months	2.92%	0.04528	<input type="checkbox"/>	48 months	3.10%	0.04033
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Loan Purpose: <input type="checkbox"/> Real Estate Purchase <input type="checkbox"/> Medical/Hospital Expenses <input type="checkbox"/> House Repair/Renovation <input type="checkbox"/> Appliance Purchase <input type="checkbox"/> Travel <input type="checkbox"/> Lot/House Equity <input type="checkbox"/> Car Equity <input type="checkbox"/> Pay Off Debts/Bills <input type="checkbox"/> Construction <input type="checkbox"/> Renovation <input type="checkbox"/> Pay Off Credit Card Balances <input type="checkbox"/> Tuition Fees <input type="checkbox"/> Personal <input type="checkbox"/> Emergency <input type="checkbox"/> Others _____	Computation of Monthly Installment: Loan Amount x Factor Rate = Monthly Installment _____ x _____ = _____																								

STATEMENT OF INCOME AND EXPENSES*

MONTHLY INCOME			MONTHLY EXPENSES		
	Borrower	Spouse	Total		
Basic Salary				Living Expenses	
Allowances				Rent & Utilities	
Business Income				Education	
Rental Income				Transportation	
Others				Monthly Amortization	
				Credit Cards/Insurance	
				Others	
TOTAL				TOTAL	

STATEMENT OF ASSETS AND LIABILITIES*

ASSETS				TOTAL AMOUNT	
Cash on Hand & In Banks					
	Name of Bank	Deposit Type	Balance		
			PHP		
				PHP	
Real Estate					
	Type	Location	Estimated Value		
			PHP		
				PHP	
Motor Vehicle					
	Make / Model	Year Acquired	Estimated Value		
			PHP		
				PHP	
Other Assets					
			Estimated Value		
			PHP		
				PHP	
TOTAL ASSETS				PHP	
LIABILITIES					
	Loan Type	Bank / Financial Institution	Monthly Amortization	Outstanding Balance	
			PHP	PHP	
Credit Cards					
	Credit Card Company	Card No.	Member Since	Expiry Date	Credit Limit
					Outstanding Balance
TOTAL LIABILITIES				PHP	
NET WORTH				PHP	

* Required by Bangko Sentral ng Pilipinas under BSP Circular 622

AGREEMENT

I affirm that each of the statements made in this application is true, correct and complete and the signature appearing herein are genuine. I agree to notify China Bank Savings, Inc. (the Bank) of any changes affecting the information contained herein. I further confirm that I do not have any outstanding civil or criminal case filed against me and that I do not have any arrearages/past due with any bank or financial institution.

I authorize the Bank to obtain and verify such information as may be required covering this application from the above references or any other sources. For this purpose, I authorize the Bank to disclose any information about me to any credit agency or regulating body for purposes of verification on reports or other requirements.

I hereby waive confidentiality of information reflected in my Income Tax Return and/or Financial Statements I submitted as part of the Bank's requirements and I authorize the Bank to conduct such random verification that may be necessary with the Bureau of Internal Revenue, with any bank, financial institution or government agency to determine the veracity of any such information.

I confirm that I do not have any relative within the first degree of consanguinity or affinity working in the Bank. I agree that this loan application shall be subject to Bangko Sentral ng Pilipinas regulations including those pertaining to directors, officers, stockholders and related interests of the Bank. I further agree and understand that, should this application be denied, the Bank is not obliged to furnish the reason for denial.

I fully understand that any material misrepresentation or failure to disclose information on my part as required herein, may cause disapproval of my loan application; and the Bank at any time, shall have the right to cancel the loan approval and/or declare the loan due and demandable.

I understand that all fees, taxes, and expenses pertaining to my loan shall be on my account and deducted from my loan proceeds.

Borrower's Signature over Printed Name / Date

REFERROR / AGENT

Branch / Agency Name: _____

Referror / Agent Name: _____

Branch / Agency Code: _____

Referror / Agent Code: _____