



Maybank

PHILIPPINES INC.
HOUSING LOAN APPLICATION FORM

Attach two (2) 2x2 photos
Please fill out back portion

1 LOAN DETAILS **4 FOR BANK'S USE ONLY**

LOAN PURPOSE		<input type="checkbox"/> HOME/CONDO/LOT ACQUIRE	<input type="checkbox"/> LOAN TAKE-OUT	<input type="checkbox"/> HOME CONSTRUCT	<input type="checkbox"/> HOME EQUITY
LOAN AMOUNT		TERM IN YEARS		TCT NO.	
TYPE OF COLLATERAL		<input type="checkbox"/> House & Lot	<input type="checkbox"/> Town House	<input type="checkbox"/> Condominium	<input type="checkbox"/> Vacant Lot
COLLATERAL LOCATION		Street Address		City / Province	
		City / Province		Zip Code	
NAME OF REGISTERED OWNER					
CONTACT PERSON					
CONTACT NUMBER					
IS THE PROPERTY MORTGAGED?		<input type="checkbox"/> NO	<input type="checkbox"/> YES	MORTGAGED TO WHOM?	

APPLICATION NUMBER	
APPLICATION DATE/TIME	
SOURCE	
REFERROR	
REFERROR SIGN OFF	
COMPLETE DOCS	
WITHIN CUTOFF	
FINAL DECISION	
LOAN AMOUNT	

2 PERSONAL INFORMATION

2.1 PRINCIPAL BORROWER

Last Name			
First Name			
Middle Name			
Birth Date		FORMAT: DD-MM-YYYY	
Civil Status		<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others	
No. of Dependents		Ages:	
Mother's Maiden Name			
Borrower's Citizenship			
Current Address	Street Address		
	City / Province		Zip Code
Length of stay in years			
Home ownership		<input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged	
		<input type="checkbox"/> Living w/ Relatives <input type="checkbox"/> Rented	
If mortgaged, to whom?			
Number of Vehicles		If mortgaged, to whom?	
Residence Landline No.			
Mobile Number			
E-mail Address			
TIN No.			
SSS / GSIS No.			
Previous Address	Street Address		
	City / Province		Zip Code

2.1 SPOUSE OR CO-BORROWER

Last Name			
First Name			
Middle Name			
Birth Date		FORMAT: DD-MM-YYYY	
Civil Status		<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others	
No. of Dependents		Ages:	
Mother's Maiden Name			
Co-borrower Citizenship			
Current Address	Street Address		
	City/Province		Zip Code
Length of stay in years			
Home ownership		<input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged	
		<input type="checkbox"/> Living w/ Relatives <input type="checkbox"/> Rented	
If mortgaged, to whom?			
Number of Vehicles		If mortgaged, to whom?	
Residence Landline No.			
Mobile Number			
E-mail Address			
TIN No.			
SSS / GSIS No.			
Previous Address	Street Address		
	City / Province		Zip Code

3 FINANCIAL

3.1 PRINCIPAL BORROWER - Current Affiliation

EMPLOYMENT INFORMATION

Name of Employer			
Employer Address	Street Address		
	City/Province		Zip Code
Nature of Business			
Contact Nos.			
Position			
Years Employed			
Gross Monthly Income			

BUSINESS INFORMATION

Name of Business			
Business Address	Street Address		
	City/Province		Zip Code
Nature of Business			
Contact Nos.			
Position			
Years In Existence			
Gross Monthly Sales			

3.3 SPOUSE OR CO-BORROWER - Current Affiliation

EMPLOYMENT INFORMATION

Name of Employer			
Employer Address	Street Address		
	City/Province		Zip Code
Nature of Business			
Contact Nos.			
Position			
Years Employed			
Gross Monthly Income			

BUSINESS INFORMATION

Name of Business			
Business Address	Street Address		
	City/Province		Zip Code
Nature of Business			
Contact Nos.			
Position			
Years In Existence			
Gross Monthly Sales			

3.2 ATTORNEY-IN-FACT of Principal Borrower (If applicable)

Name			
Postal Address	Street Address		
	City/Province		Zip Code
Employment / Business			
Telephone/Mobile No.			
Email Address			
Years affiliated		Gross Monthly Income	

3.4 ATTORNEY-IN-FACT of Spouse (If applicable)

Name			
Postal Address	Street Address		
	City/Province		Zip Code
Employment / Business			
Telephone/Mobile No.			
Email Address			
Years affiliated		Gross Monthly Income	

5 AUTHORITY FOR CREDIT INVESTIGATION

AUTHORITY FOR CREDIT INVESTIGATION

I fully understand that the submission of required documentation to support this application does not constitute automatic approval. I shall be informed of the Bank's decision regarding my application, without obligation on its part to furnish reason for rejection. I understand that MPI may provide notices to me, in written or electronic form (i.e., Short Message Service (SMS) broadcast), and accordingly, I agree to receive such notices, including SMS broadcast from MPI.

BORROWER'S SIGNATURE OVER PRINTED NAME / CO-BORROWER'S SIGNATURE OVER PRINTED NAME

By signing on this application form, I authorize Maybank Phils Inc. through its authorized representatives to verify my employment records, bank deposits/accounts, credit cards and ITR records in connection with my loan application with them. I certify that all the information provided is verified and accurate. Any information, given by other parties or me, which is not true or accurate, will automatically cause MAYBANK PHILS INC. to reject my application or cancel its approval.

MAYBANK PHILS. INC.
HOUSING LOAN APPLICATION FORM



APPLICATION NUMBER	LOAN PURPOSE
PRINCIPAL BORROWER	LOAN AMOUNT
DATE AND TIME RECEIVED	BORROWER TYPE
ORIGINATING UNIT / AO	ALL DOCS IN ORDER
DATE RETURNED, as applicable	FOR PROCESSING? <input type="checkbox"/> No <input type="checkbox"/> Yes, Date Processed _____

6 CREDIT INFORMATION							
6.1 PRINCIPAL BORROWER				6.2 SPOUSE OR CO-BORROWER			
CREDIT CARDS				CREDIT CARDS			
Card Issuer	Card Number	Credit Limit	Member Since	Card Issuer	Card Number	Credit Limit	Member Since
EXISTING LOANS / FINANCING				EXISTING LOANS / FINANCING			
Institution	Type of Loan	Loan Amount	Monthly Amort	Institution	Type of Loan	Loan Amount	Monthly Amort
BANK ACCOUNTS				BANK ACCOUNTS			
Name of Bank	Branch	Type of Account	Account Number	Name of Bank	Branch	Type of Account	Account Number

7 DOCUMENTARY REQUIREMENT CHECKLIST		
Please check the documents submitted with this form:	<i>Applicable to:</i>	<i>Remarks:</i>
<input type="checkbox"/> Completely filled out application form	All	
<input type="checkbox"/> Copy of marriage contract, if applicable	Married Borrowers	
<input type="checkbox"/> Copy of billing statements (utilities / credit cards)	All	
<input type="checkbox"/> Copy of Valid ID's	All	
<input type="checkbox"/> Bank Statements / Passbook (Last six months)	All	
<input type="checkbox"/> MRI Form (Completely filled out bank-supplied form)	Principal Borrower	
<input type="checkbox"/> Photocopy of Collateral Title (TCT / CCT)	All	
<input type="checkbox"/> Tax Declaration	All	
<input type="checkbox"/> Real Estate Tax Receipt	All	
<input type="checkbox"/> Tax Clearance	All	
<input type="checkbox"/> Lot Plan with vicinity map signed by a Geodetic Engineer	All	
<input type="checkbox"/> Floor Plan / Building Plan, if applicable	Home Construct, Home / Condo Acquire	
<input type="checkbox"/> Bill of Materials / Construction Cost Estimate	Home Construct	
<input type="checkbox"/> Job Specification	Home Construct	
<input type="checkbox"/> Statement of account	Refinancing	
<input type="checkbox"/> Official Receipts of payments for the past six (6) months	Take out loans from developer	
<input type="checkbox"/> Special Power of Attorney, if applicable	Special cases	
<input type="checkbox"/> Master of Deed of Declaration and Restriction	Condo Acquire	

Other Documentary Requirements per borrower type		
<input type="checkbox"/> Certificate of Employment	<i>Applicable to:</i>	<i>Remarks:</i>
<input type="checkbox"/> Income Tax Return (Original or Certified True Copy)	Employed Borrower	
<input type="checkbox"/> One (1) Month Payslip (No more than 45 days old)	Employed Borrower / Businessmen	
<input type="checkbox"/> Business Registration Papers	Businessmen	
<input type="checkbox"/> Articles of Incorporation / By Laws	Businessmen	
<input type="checkbox"/> Financial Statement/s (Last two years)	Businessmen	
<input type="checkbox"/> Latest Contract	Overseas Filipino Workers	
<input type="checkbox"/> Proof of Remittance (Passbook / Remittance Slips for the past 3 months)	Overseas Filipino Workers	
<input type="checkbox"/> Copy of Lease Contract/s	As applicable	
<input type="checkbox"/> Annulment / Divorce Papers	As applicable	
<input type="checkbox"/> Others, please specify _____	As applicable	

Submitted by: _____

Validate by: _____

SIGNATURE OVER PRINTED NAME

Date

Branch Officer / SE / AO (Signature over printed name)

Date

8 BRANCH ENDORSEMENT FORM - FOR BANK USE ONLY			
DATE ENDORSED			Remarks:
BRANCH			
MPI Depositor	<input type="checkbox"/> No <input type="checkbox"/> Yes (Proceed to questions below)		
Start of Relationship	Month _____ Year _____		
Deposit Type	Outstanding Balance	Three-Month ADB	
<input type="checkbox"/> CASA			
<input type="checkbox"/> TIME DEPOSIT			
<input type="checkbox"/> OTHERS			

Requested by: _____

Endorsed by: _____

SIGNATURE OVER PRINTED NAME

Date

Branch Officer / SE / AO (Signature over printed name)

Date