

### FINANCIAL INFORMATION

#### Bank Accounts (Please use separate sheet if necessary)

Name of Bank	Branch	Account Number	Account Type

#### Credit Cards (Please use separate sheet if necessary)

Name of Bank/ Company	Credit Card Number	Credit Card Limit	Expiry Date	Member Since

#### Loans with Other Banks/ Institutions (Please use separate sheet if necessary)

Name of Bank/ Company	Branch/ Address	Monthly Payment	Outstanding Balance	Remaining Term

#### Income Computation (Annual)

Applicant's Income	+	Spouse's/Co-Borrower's Income	+	Other Income	=	Gross Income
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#### PERSONAL REFERENCES

Name/Relationship	Address	Contact Numbers

### AUTHORIZATION AND WAIVER OF CONFIDENTIALITY

I hereby certify that all information in this Application and in all supporting documents submitted are true and correct, made for the purpose of obtaining credit, and that the signatures appearing thereon are genuine.

In consideration of the Bank's processing of my request for grant of loans or credit accommodation and compliance with BSP Circular Nos. 472 (as amended by BSP Circular No. 549) and 589, I hereby authorize the Bank and/ or its representative as my Attorney-in-Fact, to verify my financial capacity, credit worthiness, and all information herein, including previous credit transactions with other institutions, to conduct random verifications with the Bureau of Internal Revenue to establish the authenticity of the Income Tax Returns and accompanying Financial Statement/documents submitted by me in support of this Application and to report and make disclosures of any credit information relative to me that are to conduct random verifications with the Bureau of Internal Revenue to establish the authenticity of the Income Tax Returns and accompanying Financial Statements/documents submitted by me in support of this Application and to report and make disclosures of any credit information relative to me that are basically adverse in nature to credit information bureaus and organizations performing similar functions. I willingly and voluntarily, with full knowledge of my rights under the law, waive my rights under any and all statutory and regulatory provisions governing confidentiality of information. I hereby authorize the Bank to obtain such information as it may require concerning the statements made in this Application and that the sources to which the Bank may apply are authorized to provide any information relative to this Application.

#### AGREEMENT AS TO INSURANCE PREMIUM ADVANCES BY THE BANK

Upon my and the co-borrower's written request, the Bank may, for my and the co-borrower's account and reimbursement, advance the payment of insurance premiums with respect to the vehicle that shall be mortgaged to the Bank. I and the co-borrower, solidarily, shall reimburse the Bank for such advances upon demand by the Bank. Any delay in reimbursement shall subject the advance/s to interest and charges at the rate imposed on the principal amount of the loan. The advances and all interests and charges thereon shall form part of the obligations secured by the mortgage.

I have read the foregoing Letter of Authorization and Waiver of Confidentiality, as well as the Agreement as to Insurance Premium Advances by the Bank, and agree thereto.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

at \_\_\_\_\_.

\_\_\_\_\_  
Signature of Borrower over Printed Name

\_\_\_\_\_  
Signature of Spouse / Co-Borrower over Printed Name

#### FOR BANK USE ONLY

Source (UCPB Branch/Dealer)	Name of the Product Officer/Sales Agent	Date of Application
Politically Exposed Person <input type="checkbox"/> Yes <input type="checkbox"/> No	Clearing Employee <input type="checkbox"/> Yes <input type="checkbox"/> No	BSP Employee <input type="checkbox"/> Yes <input type="checkbox"/> No
		CIF No.



### Auto Loan

Fast, Easy and Personalized



## UCPB Auto Loan.

The key to making your dream a reality.

- High loan amounts
- Quick processing
- Available nationwide
- Low interest rates
- Extensive partnerships with top auto dealers

For more information, please inquire through:



UCPB Branches  
UCPB Consumer Finance Business Centers  
UCPB Customer Relations Center:  
(63-2) 811-9111  
Toll-free 1-800-1-888-9777  
www.ucpb.com | loans@ucpb.com

### 3 easy ways to obtain a UCPB Auto Loan:

1. Choose the vehicle to be acquired
2. Fill up this application form then submit along with the necessary requirements:

If Employed:

- Latest Income Tax Return or Certificate of Creditable Tax Withheld at Source
- Certificate of Employment and Salary or payslip for the past two (2) months
- Valid Government and Company IDs

3. Visit the nearest UCPB branch or UCPB Consumer Finance Center for consultation.

**And let UCPB do the rest!**

### What you need to know about UCPB Auto Loans:

#### Who are qualified to apply for a UCPB Auto Loan?

You are qualified to apply for a UCPB Auto Loan if:

- You have been permanently employed for a year with a minimum gross monthly income of P30,000.00
- You have been employed less than a year in a new company but in the same industry as previous company and continuity of employment is determined
- You have been in business for the last 3 years

#### Where can I use my UCPB Auto Loan?

- Purchase a brand new vehicle
- Purchase a second hand vehicle (conditions apply)
- Multi-purpose loan (your vehicle is your collateral)

#### How much can I borrow?

- The minimum loanable amount is P100,000.00

#### How much is the minimum downpayment?

- For Brand New vehicles:
  - Minimum of 20% of the listed cash price
- For Second Hand vehicles:
  - Minimum of 25% of the appraised value

#### How long is the loan term?

- For Brand New vehicles:
  - Minimum of 1 year to Maximum of 5 years
- For Second Hand Vehicles:
  - Minimum of 1 year to Maximum of 4 years

#### How can I pay for my UCPB Auto Loan?

- Enroll your UCPB deposit account for Automatic Debit Arrangement
- Issue post-dated checks



## Auto Loan Application

For Individual Borrower

PERSONAL INFORMATION			
Name of Borrower (Last Name, First Name, Middle Name)			
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Legally Separated		
Birthdate (mm-dd-yy)	Birthplace	Age	
TIN	SSS/ GSIS Number	E-mail Address	
Telephone Number	Mobile Phone Number	Facsimile Number	
Nationality	ACR (For Foreigners, indicate ACR No., date and place issued)		
Educational Attainment <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Post-Graduate			
RESIDENCE INFORMATION			
Present Home Address		ZIP Code	
		Length of Stay ___ Years ___ Months	
Home Ownership <input type="checkbox"/> Owned (not mortgaged) <input type="checkbox"/> Owned (mortgaged) <input type="checkbox"/> Owned by Parents <input type="checkbox"/> Rented from _____ Amount _____ <input type="checkbox"/> Others (specify) _____			
Permanent/ Provincial Home Address		ZIP Code	
		Length of Stay ___ Years ___ Months	
Home Ownership <input type="checkbox"/> Owned (not mortgaged) <input type="checkbox"/> Owned (mortgaged) <input type="checkbox"/> Owned by Parents <input type="checkbox"/> Rented from _____ Amount _____ <input type="checkbox"/> Others (specify) _____			
EMPLOYMENT INFORMATION			
Employment Status <input type="checkbox"/> Permanent <input type="checkbox"/> Probationary <input type="checkbox"/> Contractual <input type="checkbox"/> Unemployed / Retired <input type="checkbox"/> Self-Employed <input type="checkbox"/> Others (specify) _____			
Name of Present Employer/ Business		Nature of Business	
Address of Employer/ Business		Date of Employment	
Source of Funds	Unit/Department	Telephone Number	
Position <input type="checkbox"/> Entry Level <input type="checkbox"/> Supervisor <input type="checkbox"/> Senior Management <input type="checkbox"/> Director <input type="checkbox"/> Sales <input type="checkbox"/> Others (specify) _____			
DEPENDENTS			
Name	School	Grade/Year	Course

SPOUSE/ CO-BORROWER INFORMATION			
Name of Co-Borrower (Last Name, First Name, Middle Name)			
Relationship to Applicant	Birthdate (mm-dd-yy)	Birthplace	Age
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Legally Separated		
Present Home Address		ZIP Code	
		Length of Stay ___ Yrs ___ Mos	
Home Ownership <input type="checkbox"/> Owned (not mortgaged) <input type="checkbox"/> Owned (mortgaged) <input type="checkbox"/> Owned by Parents <input type="checkbox"/> Rented from _____ Amount _____ <input type="checkbox"/> Others (specify) _____			
Permanent/ Provincial Home Address		ZIP Code	
		Length of Stay ___ Yrs ___ Mos	
Home Ownership <input type="checkbox"/> Owned (not mortgaged) <input type="checkbox"/> Owned (mortgaged) <input type="checkbox"/> Owned by Parents <input type="checkbox"/> Rented from _____ Amount _____ <input type="checkbox"/> Others (specify) _____			
TIN	SSS/ GSIS Number	E-mail Address	
Telephone Number	Mobile Phone Number	Facsimile Number	
Nationality	ACR (For Foreigners, indicate ACR No., date and place issued)		
Educational Attainment <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Post-Graduate			
Employment Status <input type="checkbox"/> Permanent <input type="checkbox"/> Probationary <input type="checkbox"/> Contractual <input type="checkbox"/> Unemployed / Retired <input type="checkbox"/> Self-Employed <input type="checkbox"/> Others (specify) _____			
Name of Present Employer/ Business		Nature of Business	
Address of Employer/ Business		Date of Employment	
Source of Funds	Unit/Department	Telephone Number	
Position <input type="checkbox"/> Entry Level <input type="checkbox"/> Supervisor <input type="checkbox"/> Senior Management <input type="checkbox"/> Director <input type="checkbox"/> Sales <input type="checkbox"/> Others (specify) _____			
VEHICLE AND FINANCING PLAN			
Vehicle Type <input type="checkbox"/> Brand New <input type="checkbox"/> Second Hand <input type="checkbox"/> Refinancing		Usage <input type="checkbox"/> Private <input type="checkbox"/> Business	
Brand		Year (for second hand vehicles only)	
Model	Make	Color	
Suggested Retail Price	- Downpayment	=	Amount of Loan Applied For
Terms of Loan (months) <input type="checkbox"/> 12 <input type="checkbox"/> 18 <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> Others (specify) _____			