



LOAN APPLICATION FORM - INDIVIDUAL

Type of Loan:	Amount of Loan applied for:	Date(mm/dd/yr)	Application No.
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PERSONAL INFORMATION

BORROWER'S NAME			Date of Birth(mm/dd/yr)
Last Name:	First Name:	Middle Name:	Age:

Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Widow _____ years <input type="checkbox"/> Married _____ Years <input type="checkbox"/> Separated _____ years	Citizenship: OWN CAR? <input type="checkbox"/> Yes <input type="checkbox"/> No	Gender: How Many? _____
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Home Address: <input type="checkbox"/> Owned by Borrower/Spouse CLEAN <input type="checkbox"/> Owned by Borrower/Spouse Mortgaged with _____ <input type="checkbox"/> Rented <input type="checkbox"/> Living with Parents <input type="checkbox"/> Company Provided/Free	Tel. No.:	Mobile No.:
	Length of stay ____ years ____ mos.	No. of dependents/age ____/____

Previous address (if less than 2 yrs. from present address)	Tel. No.:
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EMPLOYER(or Name of business, if self-employed)	Tel. No.:	
Nature of business:	Position:	Email Address:

SPOUSE/CO-MAKER NAME	Date of Birth(mm/dd/yr)	Age:	Citizenship:
Last Name:	First Name:	Middle Name:	

EMPLOYER(or Name of business, if self-employed)	Nature of Business:	Tel. no.
OFFICE ADDRESS:	Position/Title:	Length of stay: ____ yrs. ____ mos.

MONTHLY INCOME AND EXPENSES

Applicant's Income	P _____	Monthly Exoenses	P _____
Spouse's Income	_____	Rentals	_____
Other Monthly Income	_____	Mortgages	_____
P _____			
P _____		Others	P _____
P _____		Total Expenses	_____
Total Monthly Income	P _____	Net Monthly expenses	P _____

NAME OF DEPENDENTS	AGE	SCHOOL	GRADE/YEAR

CREDIT AND BANK REFERENCES

TYPE	BANK/INSTITUTION/COMPANY	ADDRESS/BRANCH	DEPOSIT/CREDIT/INFORMATION
SAVINGS/TIME DEPOSIT PLACEMENTS			Deposit Balance
CURRENT ACCOUNT			Outstanding Balance
CREDIT CARD			Local Limit: P _____ Int'l Limit: P _____
LOAN/ CREDIT FACILITIES			Mo. Amort. P _____ O/S Balance P _____ () Line Account () One Shot
MAJOR SUPPLIERS/ CUSTOMERS			Amount of line: P _____ Credit Terms:
OTHERS(PLEASE SPECIFY)			

PERSONAL REFERENCES

Name	Relationship	Address	Tel./Mobile nos.

TIN _____ SSS/GSIS No. _____ ACR No. _____ Issued at _____ Date _____ Verification O.R. No. _____ Date _____

I hereby certify that all data and statements in this application are correct and complete, and are made for the purpose of obtaining credit, and the signatures appearing hereon are genuine. I authorize you to obtain such information as you may require concerning the statements made in this application and that the sources from w/c you may verify are authorized to provide any information relative to this application. I agree that the application may remain your property whether the credit is granted or not.

APPROVAL () APPROVED	For BHF Bank use only () DECLINE	_____ Signature Of Applicant
Conditions: _____	_____ Signature Spouse	
_____ OFFICER	_____ DATE	_____ Signature of Co-maker