CLEAR ALL



| FINAN | CE, INC. LOA | AN APP | LICATION | | | 2X2 PHOTO | | |
|--|---|--------------------|--------------------------------|------------------|------------------|---------------------------------------|--|--|
| Branch / Marketing Office: | | | | | | 111010 | | |
| How did you know about GFLYER AFC-SME: FACE | | | | | | | | |
| Submit completely filled-out and signed applica all complete documents. | ation form (indicate N/A if Not Applica | able) together wit | th complete documents req | uired. Processir | ng of applicatio | on will start only upon submission of | | |
| un complete documents. | L | OAN INFOR | MATION | | | | | |
| DESIRED LOAN AMOUNT Php | | DESIRED | TERM (MONTHS) | 24 | □ 36 □ | Others | | |
| LOAN TYPE: REAL ESTATE MO | RTGAGE (REM) | | | | | | | |
| _ | | 12011165 | | | | | | |
| LOAN PURPOSE: WORKING CAPITA PURCHASE OF EQ | = | JRCHASE (| MEDICATION OTHERS: (Pls. Speci | fy) | | | | |
| | | | AL INFORMATION | | | | | |
| FIRST NAME | MIDDLE NAME | L | AST NAME | | BIR | THDATE (mm/dd/yyyy) | | |
| SEX MALE FEMALE | BIRTH PLACE | NATIONALI | TY | MOTHER'S F | ULL MAIDEN | NAME | | |
| MARITAL STATUS: SINGLE | MARRIED SE | PARATED | | | | | | |
| | | | | | SCHOOL | | | |
| | | | | | | | | |
| | | | | | | | | |
| PRESENT ADDRESS: | | | | | | NGTH OF STAY | | |
| PERMANENT ADDRESS: PROVINCIAL ADDRESS: | | | | | | NGTH OF STAY | | |
| TEL. NO. MOBILE | NO. | EMAIL ADD. | | TIN/GISS/ | SSS/PRC NO. | | | |
| RESIDENCE OWNERSHIP | | | | | | | | |
| OWNED MORTGAGE RENTING (MONTHLY RENT) USED FREE WITH PA | | | | | | RENTS OTHERS: | | |
| =:::•::: | SCHOOL COLLEGE ATIONAL | | | DEGREE/COL | JRSE | | | |
| SCHOOL LAST ATTENDED: | | OWNED V MAKE/SE | | YEAR MOD | DEL | _AMORTIZATION: | | |
| | S | OURCE OF I | INCOME | | | | | |
| BUSINESS: SOLE PROPRIETOR | PARTNERSHIP CORPC | DRATION | | | | | | |
| BUSINESS NAME : NATURE OF BUSINESS: | | | | | | | | |
| DATE ESTABLISHED: PRODUCTS: | | | | | | | | |
| TITLE/POSITION: | | | | | | | | |
| BUSINESS ADDRESS: | | | | | | | | |
| LENGTH OF STAY: | | | | | | | | |
| TEL. NO. : | | | | | | | | |
| MONTHLY SALES / INCOME: | | | | | | | | |
| TOTAL MANPOWER: | | | OPERATING EXPENSE | : | | | | |
| OTHER SOURCE OF INCOME: | | | | | | | | |
| Investments Other Busin | | | | | | | | |
| FIRST NAME | SPOUSE/CO-BORROWER MIDDLE NAME | | AL INFORMATION (ST NAME | if applicabl | | RTHDATE (mm/dd/yyyy) | | |
| SEX | BIRTH PLACE | | NATIONALITY | | MOTH | ER'S FULL MAIDEN NAME | | |
| MALE FEMALE | | | | | | | | |
| | SPOUSE/CO-BORRO | OWER'S EMI | PLOYMENT INFORM | MATION | | | | |
| EMPLOYED: PRIVATE OGOVERN | MENT OTHERS: | | BUSINESS: SOLE PR | OPRIETOR | PARTNE | RSHIP CORPORATION | | |
| EMPLOYER/BUSINESS NAME | | | | Type of Inc | dustry | | | |
| OFFICE ADDRESS | | | | TEL. NO. | | | | |
| TITLE/POSITION: YEARS | EMPLOYED/IN OPERATION | M | ONTHLY GROSS INCOM | E | MONTH | ILY EXPENSE | | |
| OTHER SOURCE OF INCOME: Remittances Investments Other Business Pension Others (specify) MONTHLY INCOME | | | | | | | | |
| PRESENT ADDRESS | | | | | LEI | NGTH OF STAY | | |
| TEL. NO. | MOBILE NO. | | EMAIL ADD. | | TIN/GI | SS/SSS/PASSPORT NO. | | |

| | BORR | OWER'S PERSONAL REFERENCE | | | | | | | | |
|---|--|---|--------------------------|-----------------------------------|--|--|--|--|--|--|
| NAME | RELATION | ADDRESS | | CONTACT NO. | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| OTHER INFORMATION | | | | | | | | | | |
| A. BANK REFERENCES | | | | | | | | | | |
| BANI | (| FACILITY | AMO | PRTIZATION | | | | | | |
| DEPOSIT | | | | | | | | | | |
| | | | | | | | | | | |
| LOANS | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| B. TRADE REFERENCES | T51 NO | CUSTON 45DS | | TEL 110 | | | | | | |
| SUPPLIERS | TEL. NO. | CUSTOMERS | | TEL. NO. | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| Signature over printed nar | | | | | | | | | | |
| Date: (mm/dd/yyyy) | | | | | | | | | | |
| | | BANK AUTHORIZATION | | | | | | | | |
| This is to authorize AFC-SME FINA | ANCE, INC., or its authorized r | representative to verify my/our Savings/Checkin | g Account with your b | oank. | | | | | | |
| Bank Account No. | | Bank/Branch | Ad | ccount Type | | | | | | |
| | | . , | | | | | | | | |
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| Thank you very much for your ki | nd assistance. | | | | | | | | | |
| ,,, | | | | | | | | | | |
| | | | | | | | | | | |
| Signature over printed na | me | | | | | | | | | |
| | | | | | | | | | | |
| | UNDE | RTAKING AND AUTHORIZATION | | | | | | | | |
| I hereby CONSENT to and allow AFC-SI | ME FINANCE, INC. or any of i | ts Subsidiaries, Affiliates, Partners and accredit | ed Third Party Service | e Providers to collect, retrieve, | | | | | | |
| process, use and store my personal da | ta such as my name, age, ph | otographs, fingerprints, other biometric data (e | e.g., facial recognition | and voice recognition), mobile | | | | | | |
| | The state of the s | nancial data, financial profile, credit standing, longree that my personal data will be processed f | | | | | | | | |
| collection, automated processing of | · · · · · · · · · · · · · · · · · · · | rect marketing of products and services of | _ | | | | | | | |
| Affiliates, and Partners. | | | | | | | | | | |
| | | | | | | | | | | |
| | | | 6 | | | | | | | |
| Signature of Borrower over Printe Date: (mm/dd/yyyy) | _ | ature of Spouse over Printed Name : (mm/dd/yyyy) | Date: (mm/dd/yyyy) | ower over Printed Name | | | | | | |
| | | | | | | | | | | |
| | | PRIVACY POLICY | | | | | | | | |
| Each Client is deemed to have accept | ed the provisions of the Pri | vacy Policy including the Collection, Process, U | Jse, Distribution and | Delivery, and Storage of data | | | | | | |
| | | E, INC., we are committed to protect the confi | · | | | | | | | |
| Philippine law, rule, and regulation. | rom our Clients, either throu | gh private or commercial transactions, unless re | equired to do so by co | mpetent authority pursuant to | | | | | | |
| | | | | | | | | | | |
| Collection of Information and Data | | | | | | | | | | |
| All Information and data we obtain during the loan application process will be used solely in the credit process. Information and data provided are kept secure and | | | | | | | | | | |
| submitted only to the assigned departments for proper handling. | | | | | | | | | | |
| | | | | | | | | | | |
| Distribution and Provision of Information and Data is required in the process of the loan application for verification, validation, and confirmation of data. We apply this to our borrowers, subcontractors, service providers, Loan Consultants, and the authorities regulated by Philippine Law. | | | | | | | | | | |
| In the event of a request for information | on, we will notify the Client in | advance through means including but not limit | ed to email, phone ca | | | | | | | |
| respond or object to the said notice. If Client has no objection and thereby cor | · · · · · · · · · · · · · · · · · · · | se from the Client within three (3) days from the mation. | ie date of notification | , then we will assume that the | | | | | | |
| | | | | | | | | | | |
| Client's information and data is stored securely in the system, and we constantly perform maintenance in our systems to ensure that it exceeds current security standard. I have read, understood, and agree with the privacy policy of AFC-SME FINANCE, INC. | | | | | | | | | | |
| security standard. There read, and elstood, and agree with the privacy policy of Ar C-SIVIL FINANCE, INC. | | | | | | | | | | |
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| DDINICIDAL BODDOWS | | CDOLLCE | | | | | | | | |
| PRINCIPAL BORROWE (Printed Name and Signa | | SPOUSE (Printed Name and Signature) | | -MAKER me and Signature) | | | | | | |
| , | • | | , | , | | | | | | |