



LOAN APPLICATION

2X2
PHOTO

Branch / Marketing Office: _____
 How did you know about AFC: FLYERS LOAN CONSULTANT (name) _____
 WALK-IN TO BRANCH REFERRAL FROM AFC EMPLOYEE (name) _____

Submit completely filled-out and signed application form (indicate N/A if Not Applicable) together with complete documents required. Processing of application will start only upon submission of all complete documents.

LOAN INFORMATION

DESIRED LOAN AMOUNT Php	DESIRED TERM (MONTHS) <input type="checkbox"/> 6 <input type="checkbox"/> 12 <input type="checkbox"/> 18 <input type="checkbox"/> 24 <input type="checkbox"/> others
LOAN TYPE: <input type="checkbox"/> CAR REFINANCING <input type="checkbox"/> TRUCK REFINANCING <input type="checkbox"/> 2 ND HAND CAR / TRUCK / MULTICAB PURCHASE	<input type="checkbox"/> PUJ LOAN <input type="checkbox"/> TAXI /PUV <input type="checkbox"/> REAL ESTATE MORTGAGE (REM) <input type="checkbox"/> RCL W/ REM
LOAN PURPOSE: BUSINESS <input type="checkbox"/> WORKING CAPITAL PLS. SPECIFY _____ <input type="checkbox"/> PURCHASE OF EQUIPMENT <input type="checkbox"/> PROPERTY PURCHASE OTHERS Pls. Specify _____	

BORROWER'S PERSONAL INFORMATION

FIRST NAME	MIDDLE NAME	LAST NAME	BIRTHDATE
GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTH PLACE	NATIONALITY	MOTHER'S FULL MAIDEN NAME
MARITAL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> WIDOWED			
NAME OF DEPENDENTS		AGE	SCHOOL
PRESENT ADDRESS			LENGTH OF STAY
PERMANENT ADDRESS			LENGTH OF STAY
PROVINCIAL ADDRESS:			LENGTH OF STAY
TEL. NO.	MOBILE NO.	EMAIL ADD.	TIN/GISS/SSS/PRC NO.
RESIDENCE OWNERSHIP <input type="checkbox"/> OWNED <input type="checkbox"/> MORTGAGE <input type="checkbox"/> RENTING (MONTHLY RENT) <input type="checkbox"/> USED FREE WITH PARENTS <input type="checkbox"/> OTHERS _____			
EDUCATIONAL ATTAINMENT: <input type="checkbox"/> HIGHSCHOOL <input type="checkbox"/> COLLEGE <input type="checkbox"/> POST GRADUATE <input type="checkbox"/> VOCATIONAL			DEGREE/COURSE
SCHOOL LAST ATTENDED:		OWNED VEHICLES : MAKE/SERIES : _____ YEAR MODEL _____ AMORTIZATION: _____	

SOURCE OF INCOME

BUSINESS: <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION	
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: <input type="checkbox"/> Investments <input type="checkbox"/> Other Business <input type="checkbox"/> Others (specify) _____	

SPOUSE/CO-BORROWER'S PERSONAL INFORMATION (if applicable)

FIRST NAME	MIDDLE NAME	LAST NAME	BIRTHDATE
GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTH PLACE	NATIONALITY	MOTHER'S FULL MAIDEN NAME

SPOUSE/CO-BORROWER'S EMPLOYMENT INFORMATION

EMPLOYED: <input type="checkbox"/> PRIVATE <input type="checkbox"/> GOVERNMENT OTHERS: _____	BUSINESS: <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION		
EMPLOYER/BUSINESS NAME	Type of Industry		
OFFICE ADDRESS	TEL. NO.		
TITLE/POSITION:	YEARS EMPLOYED/IN OPERATION	MONTHLY GROSS INCOME	MONTHLY EXPENSE
OTHER SOURCE OF INCOME: <input type="checkbox"/> Remittances <input type="checkbox"/> Investments <input type="checkbox"/> Other Business <input type="checkbox"/> Pension Others (specify) _____			MONTHLY INCOME
PRESENT ADDRESS			LENGTH OF STAY
TEL. NO.	MOBILE NO.	EMAIL ADD.	TIN/GISS/SSS/PASSPORT NO.

BORROWER'S PERSONAL REFERENCE

NAME	RELATION	ADDRESS	CONTACT NO.

OTHER INFORMATION

A. BANK REFERENCES

BANK	FACILITY	AMORTIZATION
DEPOSIT _____ _____	_____	_____
LOANS _____ _____	_____	_____

B. TRADE REFERENCES

SUPPLIERS	TEL. NO.	CUSTOMERS	TEL. NO.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature over printed name

Date:

BANK AUTHORIZATION

This is to authorize ASIALINK FINANCE CORP., or its authorized representative to verify my/our Savings/Checking Account with your bank.

Bank Account No.	Bank/Branch	Account Type
_____	_____	_____
_____	_____	_____
_____	_____	_____

Thank you very much for your kind assistance.

Signature over printed name

UNDERTAKING AND AUTHORIZATION

I/We hereby certify that all the information furnished in this Application Form are true, correct and complete, and that the signatures herein are true and authentic. I/We hereby authorize ASIALINK FINANCE CORPORATION, its subsidiaries and affiliates, to obtain, validate or verify and, if necessary, share, report or disclose such data or information and thereby waive my/our rights in relation to confidentiality of accounts under R.A.1405, and privacy of credit data or other data or information pertaining to me/us or my/our accounts as may be necessary or for AFC to comply with RA 9510 (Credit Information System Act), RA 10173 (Data privacy Act) and their implementing rules and regulations as well as other laws and issuances. I/We agree that this application and all supporting documents and any other information obtained by ASIALINK FINANCE CORPORATION relative to this application shall remain as its property irrespective of the granting of the loan. I/We further acknowledge that any false statement or concealment of any information which may be discovered after the loan has been granted shall be sufficient basis for ASIALINK FINANCE CORPORATION to consider the loan immediately due and demandable.

Signature of Borrower over Printed Name

Date:

Signature of Spouse over Printed Name

Date:

Signature of Co-Borrower over Printed Name

Date:

PRIVACY POLICY

Each Client is deemed to have accepted the provisions of the Privacy Policy including the Collection, Process, Use, Distribution and Delivery, and Storage of data information by filling out this application form. At **ASIALINK FINANCE CORPORATION**, we are committed to protect the confidentiality and security of our clients at all times. We will not disclose information and data from our Clients, either through private or commercial transactions, unless required to do so by competent authority pursuant to Philippine law, rule, and regulation.

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, we will notify the Client in advance through means including but not limited to email, phone call, and text, and the Client may respond or object to the said notice. If we do not receive a response from the Client within three (3) days from the date of notification, then we will assume that the Client has no objection and thereby consents to the request for information.

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 **ASIALINK FINANCE CORPORATION**.

PRINCIPAL BORROWER

(Printed Name and Signature)

SPOUSE

(Printed Name and Signature)

CO-MAKER

(Printed Name and Signature)

