

Arlene Mercado #09397973277

ASIALINK FINANCE CORPORATION DOWNLOADABLE APPLICATION FORM						2x2 Picture
<input type="checkbox"/> New Accounts <input type="checkbox"/> Renewal: ___ 2nd ___ 3rd ___ 4th Availment <b>TYPE OF LOAN</b> <input type="checkbox"/> Doctor <input type="checkbox"/> Business <input type="checkbox"/> Salary <input type="checkbox"/> Car Loan <input type="checkbox"/> PUV/TAXI Loan <input type="checkbox"/> Real Estate Loan <input type="checkbox"/> Migrant Loan <input type="checkbox"/> OFW Loan <input type="checkbox"/> Seaman Loan <input type="checkbox"/> Beneficiar/Alotee Loan <input type="checkbox"/> Appliance Amount Applied P _____ Agent: _____ TERMS: <input type="checkbox"/> 3 months <input type="checkbox"/> 6 months <input type="checkbox"/> 12 months						
<b>NO FEES OR PAYMENTS TO BE COLLECTED BY AGENTS</b>						
PERSONAL INFORMATION						
Last Name		First Name		Middle Name	Birth Day	Age
Civil Status		Mother's Maiden Name			No. of dependents	
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed		Name		Age	School	
Present Address (Unit no, Street, Village/Subdivision/Barangay, Municipality, Province)						Length of Stay
Home Ownership					Home Phone Number	
<input type="checkbox"/> Owned <input type="checkbox"/> Owned (but mortgaged) <input type="checkbox"/> Rented, Mo. P _____ <input type="checkbox"/> Used Free						
Previous Address					Cellphone Number	
Provincial Address					E-mail Address	
WORK INFORMATION						
Employment Type				Employer/Business Name		DTI / SEC Reg No.
<input type="checkbox"/> Self-Employed <input type="checkbox"/> Private <input type="checkbox"/> Government <input type="checkbox"/> Professional: _____						
Employer/ Business Address (Flr., Building, No., Street, Village/Barangay/Municipality, Province)						Years in business
Phone Number	Position	Monthly Income	Professional License No.	SSS No.	TIN	Employment Status
						<input type="checkbox"/> Contractual <input type="checkbox"/> Permanent/ Regular
SPOUSE PERSONAL INFORMATION / BENEFICIARY INFORMATION						
Last Name		First Name		Middle Name	Birth Day	Age
Education		Course			School Last Attended	
<input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> High School Undergrad <input type="checkbox"/> College Undergrad						Year Graduated
Employment				Employer/Business Name		DTI / SEC Reg No.
<input type="checkbox"/> Self-Employed <input type="checkbox"/> Private <input type="checkbox"/> Government <input type="checkbox"/> Professional: _____						
Phone Number	Position	Monthly Income	Professional License No.	SSS No.	TIN	Employment Status
						<input type="checkbox"/> Contractual <input type="checkbox"/> Permanent/ Regular
Length of Stay/ Years in Business		Number of Children		Years Married		
OTHER SOURCES OF INCOME						
Name Employer/Business				Nature of Business		
Relative References (Parents, Brothers, Sisters, etc.)				Address		
Name		Address		Telephone Number		Monthly Income
BANK ACCOUNT INFORMATION						
Bank		Account Type		Account No.		Date Opened
BANK AUTHORIZATION				UNDERTAKING		
Date: _____				I/We hereby certify that all the information furnished in this Application Form are true, correct and complete, and that the signatures appearing herein are true and genuine. I/We hereby authorize ASIALINK FINANCE CORPORATION to obtain such information as maybe required concerning the validity and veracity of the information provided in this application using any applicable methods of processes, including my/our loan and deposit account, and waive my four rights under R.A. 1405. I/We further agree that this application and all supporting documents and any other information obtained by ASIALINK relative to this application shall remain as ASIALINK'S property whether or not the loan is granted. I/We agree that ASIALINK has no obligation to furnish me/us the reason for such rejection. I/We also understand that any false statement or concealment of information which maybe discovered after the loan has been granted shall be sufficient basis for ASIALINK to consider the loan due and demandable immediately.		
Dear: _____						
This is to authorize ASIALINK FINANCE CORPORATION or its authorized representatives to verify my/our savings/checking account with your bank. You are allowed to disclose the date of opening of my/our savings/checking account, the handling and the Average Daily Balance (ADB) for the last six (6) months.						
Bank	Branch / Address	Account Type	Account No.			
_____	_____	_____	_____			
Thank you very much for your kind assistance.						
Very truly yours,						
_____						
Signature over printed name						
PRINCIPAL BORROWER		SPOUSE/BENEFICIARY				
CO-BORROWER / CO-MAKER		DATE				
_____		_____				
		(Please place signature over the printed name)				

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