

ASIALINK FINANCE CORPORATION DOWNLOADABLE APPLICATION FORM		2x2 Picture	
<input type="checkbox"/> New Accounts <input type="checkbox"/> Renewal: ___ 2nd ___ 3rd ___ 4th Availment TYPE OF LOAN <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/Allotee Loan <input type="checkbox"/> Appliance Amount Applied P _____ Agent: <u>Janet M. Lim</u> TERMS: <input type="checkbox"/> 3 months <input type="checkbox"/> 6 months <input type="checkbox"/> 12 months			
NO FEES OR PAYMENTS TO BE COLLECTED BY AGENTS			
PERSONAL INFORMATION			

Last Name	First Name	Middle Name	Birthday	Age	Sex
Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed			Mother's Maiden Name		No. of dependents
Name		Age	School		
Present Address (Unit no, Street, Village/Subdivision/Barangay, Municipality, Province)					Length of Stay
Home Ownership <input type="checkbox"/> Owned <input type="checkbox"/> Owned (but mortgaged) <input type="checkbox"/> Rented, Mo. P _____ <input type="checkbox"/> Used Free				Home Phone Number	
Previous Address				Cellphone Number	
Provincial Address				E-mail Address	

WORK INFORMATION					
Employment Type <input type="checkbox"/> Self-Employed <input type="checkbox"/> Private <input type="checkbox"/> Government <input type="checkbox"/> Professional: _____			Employer/Business Name		DTI / SEC Reg No.
Employer/ Business Adress (Fir., 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	Birthday	Age	Sex
Education <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> High School Undergrad <input type="checkbox"/> College Undergrad		Course	School Last Attended		Year Graduated
Employment <input type="checkbox"/> Self-Employed <input type="checkbox"/> Private <input type="checkbox"/> Government <input type="checkbox"/> Professional: _____			Employer/Business Name		DTI / SEC Reg No.
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	

PERSONAL / CHARACTER REFERENCES				OTHER SOURCES OF INCOME			
Relative References (Parents, Brothers, Sisters, etc.)				Name Employer/Business		Nature of Business	
				Address			
				Telephone Number		Monthly Income	
				BANK ACCOUNT INFORMATION			
				Bank	Account Type	Account No.	Date Opened

BANK AUTHORIZATION								
Date: _____ 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.								
<table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Bank</td> <td style="width: 25%;">Branch / Address</td> <td style="width: 25%;">Account Type</td> <td style="width: 25%;">Account No.</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table>	Bank	Branch / Address	Account Type	Account No.	_____	_____	_____	_____
Bank	Branch / Address	Account Type	Account No.					
_____	_____	_____	_____					
Thank you very much for your kind assistance. Very truly yours, _____ <i>Signature over printed name</i>								

UNDERTAKING				
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.				
<table style="width:100%; border: none;"> <tr> <td style="width: 50%;">_____ PRINCIPAL BORROWER</td> <td style="width: 50%;">_____ SPOUSE/BENEFICIARY</td> </tr> <tr> <td>_____ CO-BORROWER / CO-MAKER</td> <td>_____ DATE</td> </tr> </table>	_____ PRINCIPAL BORROWER	_____ SPOUSE/BENEFICIARY	_____ CO-BORROWER / CO-MAKER	_____ DATE
_____ PRINCIPAL BORROWER	_____ SPOUSE/BENEFICIARY			
_____ CO-BORROWER / CO-MAKER	_____ DATE			
<i>(Please place signature over the printed name)</i>				

PN #