PhilLife FINANCIAL

NOT FOR SALE

SALARY LOAN APPLICATION

PRINCIPAL APPLICANT

1x1 or 2x2 Photo

☐ **NEW LOAN** **PURPOSE OF LOAN:**
☐ **RENEWAL** ☐Education/Tuition Fee ☐Medical/Hospitalization ☐Personal ☐Others (Pls. Specify) _____

NAME OF APPLICANT: (SURNAME/FIRST NAME/M.I.)	**DIVISION NO.:**	**STATION NO.:**	**EMPLOYEE NO.:**
CIVIL STATUS: ☐ **SINGLE** ☐ **SEPARATED** ☐ **WIDOWED** ☐ **MARRIED**	**GENDER:** ☐ **MALE** ☐ **FEMALE**	**DATE OF BIRTH:**	**PLACE OF BIRTH:**
MOTHER'S MAIDEN NAME:	**NATIONALITY:**	**NATURE OF WORK:** ☐**Education** ☐**Others:** _____	**NAME OF EMPLOYER:**
NAME & OCCUPATION OF SPOUSE:	**NET MO. TAKE HOME PAY:**	**AMOUNT APPLIED:**	**DATE OF EMPLOYMENT:**
PRESENT HOME ADDRESS: *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**	**MOBILE NO.**	**DEPED E-MAIL ADDRESS:**	
	TERM OF LOAN: _____ **Mos.**	**PERSONAL E-MAIL ADDRESS:**	
PERMANENT HOME ADDRESS: *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**	**NAME & ADDRESS OF SCHOOL ASSIGNMENT:** *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**		**PRC LICENSE NO.:** **GSIS NO.:** **TIN:**

I hereby declare that the above information including the IDs and attachments submitted is true and correct and hereby authorize PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION (PHILLIFE) to process and retain the same in accordance with R.A. No. 10173, the Data Privacy Act of 2012, and R.A. No. 9510, the Credit Information System Act.

I fully understand and agree to the terms and conditions of this loan as provided in the Disclosure Statement, Promissory Note and Authority to Deduct through the DepEd Automatic Payroll Deduction System.

✓_____ ✓_____ ✓_____
Name of Applicant Signature Date

I hereby request that until this instruction is revoked by me personally through an original signed document, all official instructions and communication with PHILLIFE in connection with my Loan shall be coursed through any of the electronic channels I specified in this Application.

✓_____ ✓_____ ✓_____
Name of Applicant Signature Date

CO-APPLICANT

NAME OF CO-APPLICANT: (SURNAME/FIRST NAME/M.I.)	**DIVISION NO.:**	**STATION NO.:**	**EMPLOYEE NO.:**
IF MARRIED, MAIDEN NAME:	**GENDER:** ☐ **MALE** ☐**FEMALE**	**DATE OF BIRTH:**	**DATE OF EMPLOYMENT:**
NAME & OCCUPATION OF SPOUSE	**DEPED E-MAIL ADDRESS:**	**PERSONAL E-MAIL ADDRESS:**	**MOBILE NO.**
HOME ADDRESS: *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**	**NAME & ADDRESS OF SCHOOL ASSIGNMENT:** *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**		

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I fully understand and agree to the terms and conditions of this loan provided in the Disclosure Statement, and Promissory Note and Authority to Deduct through the DepEd Automatic Payroll Deduction System.

_____ _____ _____
Name of Co-Applicant Signature of Co-Applicant Date

IDs and Attachments to this Application
A. Latest Original Pay slip of the Applicant **B.** Service Record of the Applicant
C. DepEd ID/GSIS ID/PRC ID/TIN/UMID (Any 2 with Specimen Signature) of the Applicant **D.** Two (2) pcs. 2x2 or 1x1 ID pictures

I hereby certify and warrant that I have conducted due diligence in soliciting this loan application, foremost of which is the verification of identity of the loan applicant either in person or through reasonably available digital means.

John Raymond Yaoto
Signature over Printed Name of PHILLIFE AGENT Date
PHILLIFE AGENT CODE: 86523 **BRANCH:** Las Pinas Branch

FOR PHILLIFE FINANCIAL USE ONLY
APPROVALS:

AMOUNT OF LOAN:	**TERM:**
MONTHLY AMORTIZATION:	**EFFECTIVITY OF DEDUCTION:**
ENDORSED FOR APPROVAL BY:	

NOTICE: PHILLIFE guarantees that the personal information provided by the Applicant and Co-Applicant will be treated with utmost confidentiality and shall be used for processing the Applicant's loan application and for sales servicing and other servicing concerns. If this application is approved, such personal information will be stored in secure database and retained while the account is in force. Further, if this application is disapproved, PHILLIFE ensure that this Application is disposed of securely including the database.

PhilLife FINANCIAL

NOT FOR SALE

SALARY LOAN APPLICATION

PRINCIPAL APPLICANT

1x1 or 2x2 Photo

☐ **NEW LOAN** **PURPOSE OF LOAN:**
☐ **RENEWAL** ☐Education/Tuition Fee ☐Medical/Hospitalization ☐Personal ☐Others (Pls. Specify) _____

NAME OF APPLICANT: (SURNAME/FIRST NAME/M.I.)	**DIVISION NO.:**	**STATION NO.:**	**EMPLOYEE NO.:**
CIVIL STATUS: ☐ **SINGLE** ☐ **SEPARATED** ☐ **WIDOWED** ☐ **MARRIED**	**GENDER:** ☐ **MALE** ☐ **FEMALE**	**DATE OF BIRTH:**	**PLACE OF BIRTH:**
MOTHER'S MAIDEN NAME:	**NATIONALITY:**	**NATURE OF WORK:** ☐**Education** ☐**Others:** _____	**NAME OF EMPLOYER:**
NAME & OCCUPATION OF SPOUSE:	**NET MO. TAKE HOME PAY:**	**AMOUNT APPLIED:**	**DATE OF EMPLOYMENT:**
PRESENT HOME ADDRESS: *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**	**MOBILE NO.**	**DEPED E-MAIL ADDRESS:**	
	TERM OF LOAN: _____ **Mos.**	**PERSONAL E-MAIL ADDRESS:**	
PERMANENT HOME ADDRESS: *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**	**NAME & ADDRESS OF SCHOOL ASSIGNMENT:** *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**		**PRC LICENSE NO.:** **GSIS NO.:** **TIN:**

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Name of Applicant Signature Date

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Name of Applicant Signature Date

CO-APPLICANT

NAME OF CO-APPLICANT: (SURNAME/FIRST NAME/M.I.)	**DIVISION NO.:**	**STATION NO.:**	**EMPLOYEE NO.:**
IF MARRIED, MAIDEN NAME:	**GENDER:** ☐ **MALE** ☐**FEMALE**	**DATE OF BIRTH:**	**DATE OF EMPLOYMENT:**
NAME & OCCUPATION OF SPOUSE	**DEPED E-MAIL ADDRESS:**	**PERSONAL E-MAIL ADDRESS:**	**MOBILE NO.**
HOME ADDRESS: *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**	**NAME & ADDRESS OF SCHOOL ASSIGNMENT:** *(No./Street, Subd., Brgy./Dist./ Municipality/City, Province)* **ZIP CODE:** **TELEPHONE NO.:**		

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_____ _____ _____
Name of Co-Applicant Signature of Co-Applicant Date

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C. DepEd ID/GSIS ID/PRC ID/TIN/UMID (Any 2 with Specimen Signature) of the Applicant **D.** Two (2) pcs. 2x2 or 1x1 ID pictures

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FOR PHILLIFE FINANCIAL USE ONLY
APPROVALS:

AMOUNT OF LOAN:	**TERM:**
MONTHLY AMORTIZATION:	**EFFECTIVITY OF DEDUCTION:**
ENDORSED FOR APPROVAL BY:	

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PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION

(Creditor)

Loan Account No. _____

DISCLOSURE STATEMENT ON LOAN/CREDIT TRANSACTION

(As Required under R.A. 3765, Truth in Lending Act)

✓**NAME OF BORROWER** _____

✓**ADDRESS** _____

	Not Deducted From Proceeds of Loan	Deducted From
1. LOAN GRANTED (Amount to be Financed)		P_____ (A)
2. FINANCE CHARGES		
a. Interest ____% p.a. from _____ to _____	P _____	P_____
b. ( ) Simple ( ) Compound		
( ) Monthly ( ) Quarterly ( ) Semi-Annual ( ) Annual		
b. Non-Interest Charges	_____	_____
c. Commitment Fee	X	X
d. Guarantee Fee	X	X
e. Other charges incidental to the extension of credit (Specify) _____	X	X
Total finance charges	P_____	P_____ (B)
3. NON-FINANCE CHARGES	_____	_____
a. Insurance Premium	_____	_____
b. Taxes	X	X
c. Documentary / Science Stamps	_____	_____
d. Notarial Fees	_____	_____
e. Others (Specify) _____	_____	_____
Total Non-Finance Charges	P_____	P_____ (C)
4. OUTSTANDING LOAN BALANCE OF PREVIOUS LOAN *(If Loan Renewal)*		P_____ (D)
5. TOTAL DEDUCTIONS FROM PROCEEDS OF LOAN (B + C + D)		P_____ (E)
6. NET PROCEEDS OF LOAN (A less E)		P_____ (F)
7. PERCENTAGE OF FINANCE CHARGES TO TOTAL AMOUNT FINANCED (Computed in accordance with Subsec X301.1)		_____ %
8. EFFECTIVE INTEREST RATE (Method of computation attached)		_____ %
9. SCHEDULE OF PAYMENT		
a. Single Payment due on _____ (Date)		_____
b. Total Installment Payments Payable _____ in months/year (no. of payments) at P _____ each installment		P_____

10. COLLATERAL

This loan is wholly/partially secured by (check):

☐ Real Estate ☐ Chattels

☐ Government Securities ☑ UNSECURED (Thru DepEd's Automatic Payroll Deduction System)

11. ADDITIONAL CHARGES IN CASE CERTAIN STIPULATIONS ARE NOT MET BY THE BORROWER

*****NOT TO BE COLLECTED THROUGH THE APDS*****

Nature	**Amount**
Late / Penalty Charges	3% per month of the amount due and unpaid
Attorney's/Collection Fee	25% of the amount due, if referred to an attorney or agency for collection; Minimum of P10, 000.00

CERTIFIED CORRECT:

_____

(Signature of Creditor/Authorized Representative Over Printed Name)

_____

Position

I ACKNOWLEDGE RECEIPT OF A COPY OF THIS STATEMENT PRIOR TO THE CONSUMMATION OF THE CREDIT TRANSACTION AND THAT I UNDERSTAND AND FULLY AGREE TO THE TERMS AND CONDITIONS THEREOF.

✓_____

(Signature of Borrower over Printed Name)

✓ Date: _____

Notice to Borrower:

1. You are entitled to a copy of this paper, which you shall sign.
2. Disclosure on loan is computed using the "diminishing method" while charges are deducted in advance (upfront) from loan proceeds.
3. Items marked "X" are not allowed under DepEd's Automatic Payroll Deduction System.

PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION

(Creditor)

Loan Account No. _____

DISCLOSURE STATEMENT ON LOAN/CREDIT TRANSACTION

(As Required under R.A. 3765, Truth in Lending Act)

✓ **NAME OF BORROWER** _____

✓ **ADDRESS** _____

	Not Deducted From Proceeds of Loan	Deducted From
1. LOAN GRANTED (Amount to be Financed)		P_____ (A)
2. FINANCE CHARGES		
a. Interest ____% p.a. from _____ to _____	P _____	P_____
b. ( ) Simple ( ) Compound ( ) Monthly ( ) Quarterly ( ) Semi-Annual ( ) Annual		
b. Non-Interest Charges	_____	_____
c. Commitment Fee	X	X
d. Guarantee Fee	X	X
e. Other charges incidental to the extension of credit (Specify) _____	X	X
Total finance charges	P_____	P_____ (B)
3. NON-FINANCE CHARGES	_____	_____
a. Insurance Premium	_____	_____
b. Taxes	X	X
c. Documentary / Science Stamps	_____	_____
d. Notarial Fees	_____	_____
e. Others (Specify) _____	_____	_____
Total Non-Finance Charges	P_____	P_____ (C)
4. OUTSTANDING LOAN BALANCE OF PREVIOUS LOAN *(If Loan Renewal)*		P_____ (D)
5. TOTAL DEDUCTIONS FROM PROCEEDS OF LOAN (B + C + D)		P_____ (E)
6. NET PROCEEDS OF LOAN (A less E)		P_____ (F)
7. PERCENTAGE OF FINANCE CHARGES TO TOTAL AMOUNT FINANCED (Computed in accordance with Subsec X301.1)		_____ %
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3. Items marked "X" are not allowed under DepEd's Automatic Payroll Deduction System.

THE HEAD, REGIONAL PAYROLL SERVICES UNIT
DepEd Regional Office No. _____
Address: _____

Loan Account No. _____

AUTHORITY TO DEDUCT
THROUGH THE DEPED AUTOMATIC PAYROLL DEDUCTION SYSTEM (APDS)

I hereby authorize DepEd to deduct from my salary through the DepEd APDS, the sum of PESOS: _____ (P _____), inclusive of principal and interest, beginning on _____ and ending on _____, and to remit the same to PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION in consideration of the loan which was granted to me on _____. In case my loan amortization is not deducted in the payroll, regardless of the reason, I also authorize DepEd to automatically adjust the termination period in my pay slip by one (1) month for every month of delay of its deduction.

The authorization is VALID AND BINDING within the aforementioned loan period, unless the loan is pre-terminated, or the authorization is otherwise revoked. Moreover, I agree that deductions that will reduce my monthly net take-home pay to lower than what is allowed under the law shall not be accommodated in the APDS.

✓_____ ✓_____
Signature over Printed Name of Borrower **Date**

PROMISSORY NOTE

For value received, the undersigned promises to pay through APDS to the order of PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION the sum of PESOS: _____ (P _____) with interest rate of _____ percent (_____ %) per annum, **TO BE PAID IN EQUAL MONTHLY INSTALLMENTS, INCLUSIVE OF PRINCIPAL AND INTEREST, IN THE AMOUNT OF P_____, BEGINNING ON_____ AND ENDING ON_____** or until full payment.

Default in the payment for six (6) consecutive installments shall render the entire unpaid balance due and demandable.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____ at_____.

✓_____
Signature over Printed Name of Borrower

✓ID No. _____ ✓Date Issued _____ ✓Place Issued_____
✓Employee No. _____ ✓Division No. _____ ✓Station No. _____
School or Station Address:
✓_____ ✓Telephone No._____
Home Address:
✓_____ ✓Telephone No._____
✓Mobile No. _____

Subscribed and sworn to before me, this _____ day of _____ 20____, the affiant identified as such person after presenting the following:

NAME **ID NO.** **DATE AND PLACE ISSUED**

NOTARY PUBLIC

Doc. No. _____
Page No. _____
Book No. _____
Series of _____

THE HEAD, REGIONAL PAYROLL SERVICES UNIT
DepEd Regional Office No. _____
Address: _____

Loan Account No. _____

AUTHORITY TO DEDUCT
THROUGH THE DEPED AUTOMATIC PAYROLL DEDUCTION SYSTEM (APDS)

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✓_____ ✓_____
Signature over Printed Name of Borrower **Date**

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For value received, the undersigned promises to pay through APDS to the order of PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION the sum of PESOS: _____ (P _____) with interest rate of _____ percent (_____ %) per annum, **TO BE PAID IN EQUAL MONTHLY INSTALLMENTS, INCLUSIVE OF PRINCIPAL AND INTEREST, IN THE AMOUNT OF P_____, BEGINNING ON_____ AND ENDING ON_____** or until full payment.

Default in the payment for six (6) consecutive installments shall render the entire unpaid balance due and demandable.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____ at_____.

✓_____
Signature over Printed Name of Borrower

✓ID No. _____ ✓Date Issued _____ ✓Place Issued_____
✓Employee No. _____ ✓Division No. _____ ✓Station No. _____
School or Station Address:
✓_____ ✓Telephone No._____
Home Address:
✓_____ ✓Telephone No._____
✓Mobile No. _____

Subscribed and sworn to before me, this _____ day of _____ 20____, the affiant identified as such person after presenting the following:

NAME **ID NO.** **DATE AND PLACE ISSUED**

NOTARY PUBLIC

Doc. No. _____
Page No. _____
Book No. _____
Series of _____

THE HEAD, REGIONAL PAYROLL SERVICES UNIT
DepEd Regional Office No. _____
Address: _____

Loan Account No. _____

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THROUGH THE DEPED AUTOMATIC PAYROLL DEDUCTION SYSTEM (APDS)

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PROMISSORY NOTE

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✓_____
Signature over Printed Name of Borrower

✓ID No. _____ ✓Date Issued _____ ✓Place Issued_____
✓Employee No. _____ ✓Division No. _____ ✓Station No. _____
School or Station Address:
✓_____ ✓Telephone No._____
Home Address:
✓_____ ✓Telephone No._____
✓Mobile No. _____

Subscribed and sworn to before me, this _____ day of _____ 20____, the affiant identified as such person after presenting the following:

NAME **ID NO.** **DATE AND PLACE ISSUED**

NOTARY PUBLIC

Doc. No. _____
Page No. _____
Book No. _____
Series of _____

Loan Account No. _____

PROMISSORY NOTE

In consideration for the funds received from PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION, I/we promise to pay jointly and severally PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION ("PHILLIFE") or order the sum of_____Pesos (P _____) to be paid without need for notice or demand, in _____ equal monthly installments amounting to _____ Pesos (P _____) commencing on _____. The loan will be repaid in full on _____.

If I/we fail to pay any monthly installments payable under this NOTE when due, I/We shall, without the need of demand, pay **OVER THE COUNTER at any PHILLIFE Branch or authorized banks** the monthly installment/s and a late payment penalty charge of THREE PERCENT (3%) of amount due per month, computed from the due date thereof until full payment.

I/We agree that all unpaid amortization, penalties and additional charges shall be paid over the counter and **NOT TO BE COLLECTED THROUGH DEPED APDS**.

Default in the payment for six (6) consecutive installments shall render the entire unpaid balance due and demandable. If any amount due on this Note is not paid at its maturity and this Note is placed on the hands of an attorney or collection agency, I/we agree to pay, in addition to the aggregate of the principal amount, interest due and any other sum payable hereunder, a sum equivalent to twenty five (25%) percent thereof as attorney's/collection fees or minimum of P10,000.00, in case no legal action is filed; otherwise, in case a suit is filed in court, I/we further agree to pay in addition to the aggregate of the principal amount, interest due and any other sum payable hereunder, a sum equivalent to twenty five percent (25%) thereof, plus attorney's fees, the cost of suit and other litigation expenses or minimum of P10,000.00.

I/We hereby empower PHILLIFE as my/our attorney in fact, at any time and at its option, to apply to the payment of any amount due under this Note any or all moneys, securities and things of value which are now or which may hereafter be in its possession.

I/We hereby waive my/our right to make application of payment under the Article of 1252 of the Civil Code of the Philippines. I/We, further, waive presentment for payment, protest, notice of dishonor of this Note and consent that the holder may extend the time of payment of any part of the whole of the debt at any time upon my/our request.

I/We expressly agree that all legal actions out of the Note may be brought in or submitted to the jurisdiction of the proper court of the National Capital Region. The parties hereto hereby waive any other venue.

Acceptance by PHILLIFE of payment of any installment or any part thereof after due date shall not be considered as extending the time for the payment of any of the installments aforesaid or as modification of any of the conditions hereof.

I/We hereby agree to shoulder stamp taxes that may be due on this Note and any other costs, fees and expenses that may be related in the execution of this Note.

This Note will inure to the benefit of and be binding upon the respective heirs, executors, administrators, successors and assigns.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____ at _____.

✓_____	_____
Applicant's Signature Over Printed Name	**Co-Applicant's Signature Over Printed Name**
✓_____	_____
Permanent Home Address	**Permanent Home Address**
Witnesses	
John Raymond Yaoto_____	_____
Signature Over Printed Name	**Signature Over Printed Name**

Acknowledgment

Republic of the Philippines)
City of _____) S.S

Before me, a Notary Public in the City of _____, the following persons personally appeared and presented their respective IDs

Name	IDs	Date and Place of Issue
Applicant:		
Lender:		

Known to me and to me known the same person who executed the foregoing documents denominated as: "Promissory Note" and who acknowledged having executed the same of their own free will and deed.

The foregoing documents consisting of ____ pages including this page the Acknowledgment appears are duly signed by the parties and their instrumental witnesses.

In witness thereof, I have hereunto set my hand and seal in the City of _____ on _____.

Doc. No. _____
Page No. _____
Book No. _____
Series of 20____

NOTARY PUBLIC

Loan Account No. _____

PROMISSORY NOTE

In consideration for the funds received from PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION, I/we promise to pay jointly and severally PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION ("PHILLIFE") or order the sum of_____Pesos (P _____) to be paid without need for notice or demand, in _____ equal monthly installments amounting to _____ Pesos (P _____) commencing on _____. The loan will be repaid in full on _____.

If I/we fail to pay any monthly installments payable under this NOTE when due, I/We shall, without the need of demand, pay **OVER THE COUNTER at any PHILLIFE Branch or authorized banks** the monthly installment/s and a late payment penalty charge of THREE PERCENT (3%) of amount due per month, computed from the due date thereof until full payment.

I/We agree that all unpaid amortization, penalties and additional charges shall be paid over the counter and **NOT TO BE COLLECTED THROUGH DEPED APDS**.

Default in the payment for six (6) consecutive installments shall render the entire unpaid balance due and demandable. If any amount due on this Note is not paid at its maturity and this Note is placed on the hands of an attorney or collection agency, I/we agree to pay, in addition to the aggregate of the principal amount, interest due and any other sum payable hereunder, a sum equivalent to twenty five (25%) percent thereof as attorney's/collection fees or minimum of P10,000.00, in case no legal action is filed; otherwise, in case a suit is filed in court, I/we further agree to pay in addition to the aggregate of the principal amount, interest due and any other sum payable hereunder, a sum equivalent to twenty five percent (25%) thereof, plus attorney's fees, the cost of suit and other litigation expenses or minimum of P10,000.00.

I/We hereby empower PHILLIFE as my/our attorney in fact, at any time and at its option, to apply to the payment of any amount due under this Note any or all moneys, securities and things of value which are now or which may hereafter be in its possession.

I/We hereby waive my/our right to make application of payment under the Article of 1252 of the Civil Code of the Philippines. I/We, further, waive presentment for payment, protest, notice of dishonor of this Note and consent that the holder may extend the time of payment of any part of the whole of the debt at any time upon my/our request.

I/We expressly agree that all legal actions out of the Note may be brought in or submitted to the jurisdiction of the proper court of the National Capital Region. The parties hereto hereby waive any other venue.

Acceptance by PHILLIFE of payment of any installment or any part thereof after due date shall not be considered as extending the time for the payment of any of the installments aforesaid or as modification of any of the conditions hereof.

I/We hereby agree to shoulder stamp taxes that may be due on this Note and any other costs, fees and expenses that may be related in the execution of this Note.

This Note will inure to the benefit of and be binding upon the respective heirs, executors, administrators, successors and assigns.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____ at _____.

_____	_____
Applicant's Signature Over Printed Name	**Co-Applicant's Signature Over Printed Name**
_____	_____
Permanent Home Address	**Permanent Home Address**
Witnesses	
John Raymond Yaoto	
_____	_____
Signature Over Printed Name	**Signature Over Printed Name**

Acknowledgment

Republic of the Philippines)
City of _____) S.S

Before me, a Notary Public in the City of _____, the following persons personally appeared and presented their respective IDs

Name	IDs	Date and Place of Issue
Applicant:		
Lender:		

Known to me and to me known the same person who executed the foregoing documents denominated as: "Promissory Note" and who acknowledged having executed the same of their own free will and deed.

The foregoing documents consisting of ____ pages including this page the Acknowledgment appears are duly signed by the parties and their instrumental witnesses.

In witness thereof, I have hereunto set my hand and seal in the City of _____ on _____.

Doc. No. _____
Page No. _____
Book No. _____
Series of 20____

NOTARY PUBLIC

Loan Account No. _____

AUTHORIZATION FOR ELECTRONIC TRANSFER OR DIRECT DEPOSIT OF LOAN PROCEEDS

PHILIPPINE LIFE FINANCIAL ASSURANCE CORPORATION
6764 STI Holdings Center, Ayala Avenue, Makati City

I, _____, hereby request that the proceeds of my loan applied with Philippine Life Financial Assurance Corporation (PHILLIFE) be released thru electronic transfer of funds/deposited directly to my payroll/UMID account in Landbank/DBP/Unionbank/ Veteran's Bank, _____ Branch with account no._____. I am issuing this letter freely and with full understanding of the benefits and features of this method of receipt of the loan proceeds, instead of the loan check that is normally forwarded to your branch office in our region for my personal claim/pick up. Attached to this letter are the clear photocopies (front and back) of my ATM and two (2) valid identification cards with signature.

_____ _____
Borrower's Signature Over Printed Full Name Date Signed

Witnessed by:

John Raymond Yaoto
_____ _____
Soliciting Agent's Signature Over Printed Full Name Date Signed

****

ACKNOWLEDGEMENT FOR THE RECEIPT OF THE LOAN PROCEEDS
THRU ELECTRONIC TRANSFER OF FUNDS

I, _____, hereby acknowledge the receipt P_____ representing the loan proceeds from PHILLIFE released thru electronic transfer of funds/ deposited directly to my payroll/UMID account in Landbank/DBP/Unionbank/ Veteran's Bank, _____ Branch with account no._____.

_____
Borrower's Signature Over Printed Full Name

****

Form No. SigCard_052018_V1.0

PhilLife FINANCIAL

SPECIMEN SIGNATURE

DATE: _____

NAME OF PRINCIPAL APPLICANT:	**NAME OF CO-APPLICANT:**
_____	_____
DIV./STN./EMPLOYEE NO.:	**DIV./STN./EMPLOYEE NO.:**
_____	_____

1. _____ 2. _____

1. _____ 2. _____

1. _____ 2. _____

For PhilLife's use only:

AUTHENTICATED BY:

John Raymond Yaoto
_____
Signature Over Printed Name/Date

APPROVED BY:

_____
Signature Over Printed Name/Date

REQUEST AND WAIVER
ON THE USE OF ELECTRONIC CHANNELS FOR OFFICIAL COMMUNICATION

I, _____, residing at _____, hereby request that until this instruction is revoked by me personally through an original signed document, all official instructions and communication with Philippine Life Financial Assurance Corp. (PhilLife) in connection with my Insurance Policy and/or Loan Product shall be coursed through any of the electronic channels I specified in the Application.

For and in consideration of PhilLife's grant of this request, I acknowledge and agree that:

1. I am solely responsible for maintaining the confidentiality and integrity of access to the above-indicated email address. I shall immediately notify PhilLife if the said email address has been discontinued, deactivated, or if I have reason to believe that such email account has been hacked or if any unauthorized third party has gained access to this email account.
2. I am solely responsible for maintaining the integrity and security of the mobile phone number that I have provided. I shall immediately notify PhilLife if this mobile phone number has been discontinued, deactivated, or compromised in any way, whether through the theft of the phone utilizing said number or through other methods.
3. I am solely and fully responsible for all instructions, communication, transactions, and activities that occur through the use of any of the channels indicated above.
4. I shall notify PhilLife through alternative communication means (e.g. telephone call, in writing, or personal visit to any PhilLife branch office) in case I receive a non-delivery report email or SMS when trying to send an email or SMS to PhilLife.
5. Any notice, email or SMS, regarding my Loan Account and/or Insurance Product from PhilLife provided to me through these channels shall be considered as official notice for enforcement of the Loan Agreement and/or Policy Contract and compliance with applicable law. This shall be without prejudice to the sending to me of notice through regular postal mail at the particular address I have provided in the Loan Center "Override".
6. All other information which may be transmitted to me via these channels will be provided only for my convenience, but should not be deemed official. Any error or discrepancy between the information transmitted via these channels and the official records of PhilLife shall not in any way prejudice or give rise to any liability on the part of PhilLife.
7. PhilLife shall take reasonable security precautions for the transmission of confidential information over these channels. However, PhilLife shall not be liable for any interception of any such data or communication which may occur beyond the reasonable control of PhilLife. Neither PhilLife nor any of its service partners, employees, or agents shall be responsible for any damages caused by communications line failure, systems failure or other occurrences beyond their control.
8. PhilLife shall utilize the foregoing strictly in connection with the maintenance of my Insurance Policy/Loan Product and shall at all times abide by the Data Privacy Act of 2012 and all its relevant implementing rules, regulations and guidelines.
9. PhilLife may be contacted through its official electronic communication channels posted at ***www.phillife.com.ph***.

_____ _____
Signature Over Printed Name Date Signed

CONSENT TO USE PERSONAL DETAILS TO INFORM ME OF GOODS AND/OR SERVICES WHICH MAY BE OF INTEREST TO A LIFE INSURED/BORROWER

I give my consent to use my personal information for marketing purposes I expressed below:

☑ Yes, I am happy to be contacted by PhilLife Marketing about other promotions by email, letter, text, message and fax.
☐ I do not wish to be contacted by PhilLife Marketing for any other promotions.

Name of Principal-Borrower/Life Insured: _____ Date: _____

Signature: _____

Witnessed by: John Raymond Yaoto Date: _____
Signature over Printed Name of Agent