

AUTO LOAN APPLICATION FORM (INDIVIDUAL BORROWER)

Marketing Office/Branch			Dealer Sale Representative		ve Date				
		LOAN		N DETAILS	DETAILS				
□ New □ Used □ Description of Unit (B		rand, Type, Year Model)		Use/Purpose					
List Cash Price	Down Po	ayment	Amount Financed	Term of	Loan	Mode of Pa	nyment 1 Debit from UCPB Savings Accoun	nt No.	
			<u> </u>	PERSONA	L INFORMATION	I II PUL L	PEDIC HOILI OCED SAVINGS ACCOUNT	III. IYU	
Name (Last Name, First Name, Middle Name)						Civil Status Single Widowe	s □ Married d □ Legally Separated	Mobile No/Contact No.	
Date of Birth (mm-dd-yyy	/y) 	Age	Place of Birth			Nationality		Email Address	
Name of Spouse			Spouse's Date of Birth (mm-dd-yyy	y) 	Mother's Maiden Nam	e	Father's Name	No. of Dependents/Age/s	
Present Home Address							Zip Code	Length of Stay yrs mos.	
Home Ownership ☐ Owned (not mortgaged ☐ Living with relatives	d) 🗆 Owr	ned (mortgaged	d) P/month 🗆 Rented	/month	Name 8	: Tel. No. of Lessor (if renting)	Number of Cars Owned		
Previous Home Address (if length of stay in present address is less than 1 year)						<u>'</u>	Zip Code	Length of Stay mos	
Permanent / Provincial Address							Zip Code	Length of Stay yrs mos	
			EDUCATIONAL	_/OCCUPATI	ON/EMPLOYMENT	Γ INFORMA	TION	,	
Borrower					Spouse/Co-Make				
Highest Educational Atta	inment/L	Degree			Name (Last Name	, First Name,	Middle Name)	Relationship to Borrower	
Source of funds TIN SSS/GSIS No.					Highest Education	Highest Educational Attainment/Degree Source of funds			
Present Employer/ Business Name (if Self-employed)					Present Employer/ Business Name (if Self-employed)				
Address of Employer/ Bu	siness				Address of Emplo	yer/ Business			
Position/Title			Date Hired/Years in Operation (i)	f Business)	Position/Title		Tel. No.	Date Hired/Years in Operation (if Business)	
Tel. No.			Email Address		TIN		SSS/GSIS No.	Email Address	
				FINANCIA	L INFORMATION				
Gross Monthly Income			Applicant	Spouse (i	f applicable)		Co-maker	Total	
Salaries & Allowances									
Business Others									
Total									
Monthly Expenses		P							
Living & Utilities									
Amortizations									
Others (Pls. specify)								<u> </u>	
Total Expenses		Ρ							
Net Disposal Income		P	P		F		P		
					BANK REFERENC	ES			
Bank Accounts		<u> </u>	Bank/Branch	<u>Dep</u>	osit Type		Account No.	<u>Outstanding Balance</u>	
						- <u></u>			
Loans / Credit Facility			Bank/Branch		an Type		Mo. Amortization	Outstanding Balance	
Louis / Credit I acitily		<u>.</u>	Danie Dranch	<u>LO:</u>	<u>ωι τ γ μ </u>		mo. Amortization	Outstanding batance	
Credit Cards			Issuer	C	ard No.		Credit Limit	Outstanding Balance	
Major Suppliers /Customers	s <u>Company Name & Address</u> <u>Cred</u>		<u>dit Term</u>	Term Amount of Line		<u>Outstanding Balance</u>			
									
PERSONAL REFERENCES									
		Na	me		Com	piete Address	s and Contact Nos.	Relationship	
								i	

AUTHORIZATION AND WAIVER OF CONFIDENTIALITY

I/We warrant that all information and documents given to the Bank and in connection with the credit activities applied for are true and correct in all material respect. Should any of the information provided herein be found false, the Bank may disapprove this application or, in case the loan proceeds have already been released, declare the loan to be immediately due and demandable.

I/We hereby authorize UCPB Savings Bank or its duly authorized representative/s to ascertain any and all information of concern relative to the investigation on my/our character, general reputation, business operation, employment record, bank records and credit history. Further, I/We hereby authorize the bank and/or its representative to verify my/our financial capacity, creditworthiness and all information herein, including previous credit transactions with other institutions and to conduct random verifications with the BIR to establish the authenticity of the submitted Income Tax Returns.

I/We willingly and voluntary, with full knowledge of my/our rights under the law, waive my/our rights under any and all statutory and regulatory provisions governing confidentiality of information and authorize the sources to which it may apply to provide any information relative to this application. I/We hereby hold the Bank, its officers, employees and agents fee from any claims, damages or liabilities of whatever kind and nature that may arise in relation to confidentiality and authority herein granted.

DATA PRIVACY CONSENT

By signing below, I/We hereby certify that the information stated above are true and correct. I/we acknowledge that I/we are aware of our rights as data subject under the Data Privacy Act of 2012 and its implementing rules and regulations. Pursuant thereto, I/we hereby authorize any affiliate or subsidiary under the Land Bank of the Philippines Group (LBP Group) the general use of the personal information, sensitive personal information, and privileged information obtained during the course of my/our transaction with UCPB Savings Bank (UCPBS).

I/we further authorize the sharing of my/our personal information, sensitive personal information, and privileged information with LBP Group and authorized data recipients including credit bureaus/entities, financial institutions, counterparties, underwriters, facility/collateral agents, custodians, accredited insurers, trustees, assignees, buyers, subrogees, or transferees or those involved in the product, service, facility or transaction. I/we also consent LBP Group to collect, process, access, use, disclose, retain for five (5) years or for as long as necessary for the fulfillment of the transaction herein my/our personal information, sensitive personal information, and privileged information, or other acts necessary for the execution of the transaction herein or other transaction that I may authorize; to offer, cross-sell, and provide new or related products and services of LBP Group; and to comply with reporting obligations to government agencies by UCPBS.

Likewise, I/we consent that my/our information may be collected and processed by UCPBS for the purposes of marketing and advertising its products and services, handling bank-client relationships and transactions, business development, analysis and management, supporting and enhancing its policies, operations, controls and internal systems, and fulfilling its regulatory obligations and government reporting requirements.

I/We acknowledge that should I/we wish to access, update or correct certain information or dispute or withdraw consent to the use of any of the information provided herein, I/we may communicate with UCPB Savings Bank's Data Protection Officer by emailing dpo@ucpbsavings.com.

CERTIFICATION OF AUTHENTICITY								
I/We certify that the documents submitted are authentic and original constatements and information provided therein are true and correct.	opies, or true and f	aithful reproductions of the original, complete, and that all						
Signature of Applicant	(S) ATTO E	Signature of Spouse / Co-Maker						

USB Form No. 05-85-2019