

Brokers Accreditation Form

PERSONAL DETAILS			
Name: _____		Date of Birth: _____	Age: _____
(Last)	(First)	(Middle)	Citizenship _____ Sex: _____
Home Address _____			Civil Status: _____
SSS No. _____	TIN No. _____	Email _____	
Tel No. _____	Cellphone No. _____	Fax No. _____	
Years in the above _____ mo/s _____ years/s		<input type="checkbox"/> Own	<input type="checkbox"/> Rent <input type="checkbox"/> Living with Relatives
Present Employer/ Business Name: _____			Tel. No. : _____
Business Address _____			
Years in Employment/ Business: _____		Position : _____	

EMPLOYMENT / BUSINESS RECORD		
Position	Company	Year Employed / In Business

LICENSE / AFFILIATIONS DETAILS			
No. of years in Real Estate Business: _____			
PRC License No. _____			
Market of Specialization:			
<input type="checkbox"/> Low Cost Housing	<input type="checkbox"/> Middle Cost Housing <input type="checkbox"/> High End Housing		
Area of Concentration:			
<input type="checkbox"/> NCR	<input type="checkbox"/> Luzon <input type="checkbox"/> Visayas <input type="checkbox"/> Mindanao		
Affiliated Developers <i>(please include inclusive Dates / Year):</i>	Affiliated Brokerage <i>(if applicable, inclusive of Dates / Year)</i>		
1. _____	1. _____		
2. _____	2. _____		
3. _____	3. _____		
4. _____	4. _____		
Banks accredited with:			
Name of Bank	Contact Person	Contact No.	Years Accredited
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CHARACTER REFERENCES			
Name	Company Name	Relationship	Tel. No

I hereby certify that all information furnished herein are true and correct to the best of my knowledge. The above information are given for the purpose of my accreditation as broker / sales agent and hereby authorize Allied Savings Bank (ASB) to obtain information concerning any statement made herein.

Signature over Printed Name

Approved By:

For Bank's Use
