_	
AGENT CODE NO.:	



## ROBINSONS LAND CORPORATION - INTERNATIONAL MARKETING DEPARTMENT

## STANDARD AGENT INFORMATION SHEET (SAIS)

	Mr.	Last Name		Given Name		Middle Name	Suffix				
lΗ	Ms.									РНОТО	
Present A	Mrs.	No. Street		City/Province		Country		1x1			
i resent A	-uui ess.	140.	Jucet		City/Province		Country		red background		
Civil State	iie .		Citizenship			Date of Birth				(Please put name at the back of the photo)	
Civii Stati	Single	Widow	Ollizeriship			(mm-dd-yy)					
	Married	Separated	Age			Place of Birth					
							<u> </u>				
Bank Acc	count Details:	(For Commission Check		raphic Transfer	Rohinsons F	Bank Deposit	Personal Co	ntact into	:		
A 1	Na		rologi		T CODITION I	Jank Bopook					
Account	Account Name						Telephone				
Account No.							Mobile				
Bank Name							Email				
Branch/A	Branch/Address						TIN				
IBAN						REBL#					
Swift/Sor	t Code					Authorized person to pick-up the check on my behalf and deposit to the given bank account details:					
Currency						deposit to the	given ban	k account	details:		
Currency	'										
				EMPLO	YMENT RE	CORD					
	Occupation:				Nature of B	usiness:		Yı	rs. of Exp	erience:	
	Company/Emp										
	Office Addre	ss (Abroad)			I	1					
Phone #					Mobile #						
Fax #				EDUO	Email	2000					
		Name of Sahaa	I/A alalmana	EDUCA	TIONAL RE		V A44		Henero/A	warda/Sahalarahina	
Name of School/Address					Cour	se/Degree	Years Attended Honors/Awards/Sc			wards/Scholarships	
College Post Grad	duate.										
Post Graduate  If presently studying (specify)											
ii presenti	iy stadying (spe	,ony)		REAL EST	TATE BACK	GROUND					
# of Yrs ii	n Real Estate I	Business:				eople (list name	s in attached s	sheet):			
				Accreditations with	with other Property Developers						
Company			Date	e Accredited Contact Person			Telephone No.				
					operties Sol	d					
Project Loc			Location	on # of Units			F	Peso Valu	е		
	7				of Specializa		<u> </u>				
		um		Lot / House & Lot	N OTHER O		wnhouse		Leis	sure/Shares	
MEMBERSHI					RGANIZATIONS		Data	of Mombo	rohin		
Organization				Positions Held			Date of Membership				
					CARISSA	A DENISE LYTTI		_			
	perty Specialist			rector (Full name)		Head of Sales-IN	1		Authorize	ed Representative	
Have you been hired previously by RPPMC or any of its subsidiaries?											
							Date Left: Date Left:				
Status			<del>-</del>	(to be filled-up by S	MSD)						
l '											
This is to	certify that th	e above informa	ation are true	and correct.							
EOD INTE	EDNATIONAL	MADKETING	SE ONI V				AGENT SI	GNATUR	E OVER I	PRINTED NAME	
	FOR INTERNATIONAL MARKETING USE ONLY.  Note: All MUST be filled-out to be accepted and encoded in the system.							DATE			