

BUYER'S INFORMATION SHEET (BIS)

DATE OF RESERVATION:

UNIT DETAILS

PROJECT: BLOCK NO: HOUSE MODEL:
 PHASE NO: LOT NO: LOT AREA: FLOOR AREA:

GENERAL DETAILS

BROKER: SALES MANAGER: SALES AGENT:

LOAN DETAILS

TCP: MISC FEE: MOVE IN FEE: TPP:
 RF: CASH-OUT AMOUNT: CASH-OUT TERM: CASH-OUT MONTHLY:

FINANCING SCHEME: ☐ HDMF FINANCING ☐ SPOT CASH ☐ IN HOUSE FINANCING ☐ DEFERRED CASH ☐ BANK FINANCING

LOAN AMOUNT: MONTHLY AMORTIZATION: 30 YEARS 25 YEARS 20 YEARS 15 YEARS 10 YEARS 5 YEARS OTHERS:

PERSONAL DETAILS

DETAILS OF: ☐ PRINCIPAL ☐ CO-BORROWER ☐ SPOUSE ☐ ATTY. IN FACT

FULL NAME (LAST NAME) FULL NAME (FIRST NAME) FULL NAME (MIDDLE NAME)
 DATE OF BIRTH (MM/DD/YYYY) AGE
 SEX (PLS CHECK ONE) ☐ MALE ☐ FEMALE ☐ MALE ☐ FEMALE
 CIVIL STATUS (PLS CHECK ONE) ☐ SINGLE ☐ WIDOW/ER ☐ SINGLE ☐ WIDOW/ER
☐ MARRIED ☐ SEPARATED ☐ MARRIED ☐ SEPARATED
 TIN NUMBER PAG-IBIG MID NUMBER SSS NUMBER
 EDUC. ATTAINMENT-DEGREE/COURSE SCHOOL/UNIVERSITY-YR. GRADUATED

CONTACT DETAILS

RESIDENCE PHONE NUMBER
 MOBILE PHONE NUMBER
 EMAIL ADDRESS
 FACEBOOK ACCOUNT

RESIDENCE

PRESENT HOME ADDRESS

HOME OWNERSHIP (PLS. CHECK ONE) ☐ OWNED-NOT MORTGAGE ☐ OWNED-NOT MORTGAGE
☐ OWNED-MORTGAGE ☐ OWNED-MORTGAGE
☐ RENTED ☐ RENTED
☐ LIVING WITH PARENTS/RELATIVES ☐ LIVING WITH PARENTS/RELATIVES
☐ OTHERS ☐ OTHERS

LENGTH OF STAY YEARS MONTHS YEARS MONTHS

PERMANENT HOME ADDRESS

LENGTH OF STAY YEARS MONTHS YEARS MONTHS

INCOME SOURCE

TYPE OF EMPLOYMENT: ☐ LOCAL ☐ OFW ☐ SELF EMPLOYED ☐ LOCAL ☐ OFW ☐ SELF EMPLOYED
 TYPE (PLS. CHECK ONE) EMPLOYED-PRIVATE EMPLOYED-PRIVATE
 EMPLOYED-GOVERNMENT EMPLOYED-GOVERNMENT
 SELF-EMPLOYED WITH BUSINESS SELF-EMPLOYED WITH BUSINESS
 SELF-EMPLOYED PROFESSIONAL SELF-EMPLOYED PROFESSIONAL
 OTHERS OTHERS

STATUS OF EMPLOYMENT REGULAR PROBATIONARY CONTRACTUAL REGULAR PROBATIONARY CONTRACTUAL

PRESENT EMPLOYER/BUSINESS

NAME: ADDRESS: PHONE NUMBER: FAX NUMBER:

TYPE (PLS. CHECK ONE) ☐ SINGLE PROPRIETORSHIP ☐ SINGLE PROPRIETORSHIP
☐ PARTNERSHIP ☐ PARTNERSHIP
☐ CORPORATION ☐ CORPORATION

NATURE OF BUSINESS LENGTH OF STAY YEARS MONTHS YEARS MONTHS

POSITION/RANK

PREVIOUS EMPLOYER (IF APPLICABLE)

NAME: ADDRESS: PHONE NUMBER: FAX NUMBER:

LENGTH OF STAY YEARS MONTHS YEARS MONTHS

POSITION/RANK

PRINCIPAL BORROWER'S DEPENDENTS									
NAME		AGE		RELATIONSHIP		SCHOOL/EMPLOYER			
COLLATERAL DETAILS									
PROPERTY ADDRESS (NUMBER/STREET/SUBDIVISION/BRGY./MUNICIPALITY/CITY/PROVINCE)									
SELLING PRICE/EST MARKET VALUE:									
TCT/CCT NO.:		LOT AREA:		FLOOR AREA:		LOT NO:		BLOCK NO:	
PRESENT REGISTERED OWNER:				CONTACT NUMBER/S:					
CREDIT CARDS									
BANK	CARD NUMBER	MEMBER SINCE	EXPIRATION	AVE MO.PAYMENT		OUTSTANDING BALANCE		CREDIT LIMIT	
LOANS									
BANK	TYPE OF CREDIT/LOAN	LOAN AMOUNT	MONTHLY PAYMENT	OUTSTANDING BALANCE		MATURITY DATE		STATUS	
OTHER ASSETS									
TYPE OF PROPERTY			LOCATION/DESCRIPTION				ESTIMATED VALUE		
BANK REFERENCES									
BANK	ACCOUNT NUMBER		TYPE OF ACCOUNT		DATE OPENED		AVERAGE BALANCE		
TRADE / PERSONAL REFERENCES									
NAME		RELATIONSHIP (SUPPLIER/CUSTOMER/PERSONEL)		ADDRESS			CONTACT NUMBER/S		
FINANCIAL INFORMATION									
MONTHLY GROSS FAMILY INCOME				MONTHLY FAMIL EXPENSE					
		PRINCIPAL BUYER / CO-BORROWER		SPOUSE		FOOD			
						RENTAL/AMORTIZATION (IF APPLICABLE)			
						EDUCATION			
						LIGHT & WATER			
BASIC SALARY (COLA/PERA)						CLOTHING & MEDICAL			
ALLOWANCES/OTHER REGULAR MO.INCOME						TEL/MOBILE/CABLE/OTHER SUBSCRIPTIONS			
COMMISSION/OTHER INCOME						TRANSPORTATION			
OTHER INCOME FROM BUSINESS						OTHER: LOANS/CREDIT CARDS			
MONTHLY TOTAL						TOTAL			
UNDERTAKING									
<p>By signing below, I/we hereby confirm that the information above and documents I/we have given are true and correct, and I/we authorized Social Homes, Inc. (the Developer") to verify and investigate the same from whatever source it may consider appropriate.</p> <p>I/we understand that my falsifying any of the above information, including the enclosed/attached documents, if any, is sufficient ground for legal action against me/us and the rejection of my/our application. I/we further understand that should my/our application be denied, the financial facility has no obligation on its part to furnish me/us with the reason for such rejection and/or to return my/our application form and documents.</p> <p>Finally, I/we confirm that I/we have read and understood the terms and conditions herein provided and that I am/we are entering into this transaction with my/our full consent.</p>									
<p>_____</p> <p>BORROWER'S SIGNATURE OVER PRINTED NAME / DATE</p>					<p>_____</p> <p>SPOUSE SIGNATURE OVER PRINTED NAME / DATE</p>				
ENDORSE BY:		APPROVED BY:							
		LOLLU R. DOMIGO							
Licensed No.		VP-SALES & MARKETING							
THIS PORTION IS FOR SOCIAL HOMES, INC. USE ONLY									
ENCODE / RECEIVED FROM APPLICANT			SENT TO/DATE:			RECEIVED BY:		APPROVED/DISAPPROVED /DEFER	
BY/DATE:			SENT BY:			DATE:		DATE:	
REMARKS /ENDORSEMENT: SALES ADMIN (ORIGINAL);ACCOUNTING(ORIGINAL);MARKETING(PHOTOCOPY);BROKER(PHOTOCOPY)									

SKETCH

PRESENT ADDRESS:

Revised May 2017