

APPLICANT INFORMATION

First Name

Middle Name

Surname

Gender

Male Female

Date of Birth (mm/dd/yyyy)

Nationality

Marital Status

Single Married Widowed Divorced/Separated Living Together

Residential Status

Owned Rented Public Housing Mortgaged Living with parents/ relatives
 Company owned Others: _____ Mortgage/Rent per month: _____

Current Home Address

Postal/Zip Code

No. Street Barangay/ Municipality

City Province

Length of Stay
months: years:

Home Phone No. (Area code)-(Phone No.)

Office Phone No. (Area code)-(Phone No.)

Mobile Phone No. (Mobile Code)-(Mobile No)

Email Address

Reason for Application (select all that apply)

- Unemployment / Early Retirement /Retrenchment
- Pay Cut / Loss of income / Business Downturn
- Sickness
- Death in Family
- Domestic Problems
- Increase in Household Expenses
- Victim of Calamities
- Over -indebtedness
- Others please specify: _____

Occupation and Finances

Employment Status

Employed Self-employed Housewife Retired Unemployed

Nature of Business or Work

Annual Income

Current Employer / Business Name

Job Title / Position

Office Address

Postal/ZipCode

Floor _____ Bldg. name _____ Bldg. no. _____

Street/ Road _____ City/ Municipality _____

Job tenure (For employed applicants only.) Current job _____ months _____ year	Length of business existence (For self-employed applicants only) _____ months _____ year
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Source of Funds:

Preferred Mailing Address (P.O. Box is not accepted)

Home address Office address

SPOUSE INFORMATION (Fill only if applicable)

First Name _____

Middle Name _____

Surname _____

Date of Birth (mm/dd/yyyy)	Mobile Number (Mobile Code)-(Mobile No)	Office Phone No. (Area code)-(Phone No.)
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Employment Status
 Employed Self-employed Housewife Retired Unemployed

Nature of Business or Work	Annual Income
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Current Employer / Business Name	Job Title / Position
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Source of Funds:

REQUIRED DOCUMENTS (Documents supplied, including this form, shall not be returned)

To ensure speedy processing of this application, please enclose a copy of the following :

- Employed (Any of the following: ITR or 3 months latest payslip)
- Self-Employed (Any of the following: ITR Form 1701, Audited Financial Statement)
- And other supporting income proof

LIABILITIES (Credit cards, personal loans, car loans and mortgages in HSBC and other banks)

Bank Name	Loan Type <i>(credit card, personal loan, car loan, mortgage)</i>	Monthly Amortization	Total Outstanding Balance <i>(as at latest statement prior this application)</i>
1.			
2.			
3.			
4.			
5.			
6.			

INCOME AND EXPENSES

MONTHLY INCOME	Php	MONTHLY EXPENSES <i>(continued)</i>	Php
<i>Gross Salary</i>		<i>Transportation Fee</i>	
<i>Bonuses and Commission</i>		<i>Food & Groceries</i>	
<i>Allowance / Overtime Pay</i>		<i>Clothing</i>	
<i>Dividends / Interest / Capital Gains</i>		<i>Child Care / Dependents Allowance</i>	
<i>Rental Income</i>		<i>Education</i>	
<i>Others (please specify)</i>		<i>Health & Dental Care</i>	
TOTAL MONTHLY INCOME		<i>Insurance Plans / Premiums</i>	
MONTHLY EXPENSES	Php	<i>Investment Plans / Premiums</i>	
<i>Housing (Rent / Mortgage Loan)</i>		<i>Investment Plans / Premiums</i>	
<i>Property Management Fee</i>		<i>Others (please specify)</i>	
<i>Car Installment & Maintenance</i>		TOTAL MONTHLY EXPENSES	
<i>Water, Electricity & Gas Fee</i>			
<i>Phone (Home, Mobile or Internet)</i>			

DECLARATION

I hereby certify that the information I have given in this application is in all respects true, complete, updated and correct. I have not withheld any information on my financial position or commitments that may affect HSBC's decision on this application.

Date