

<b>Rank</b>

# OFFER TO PURCHASE

\_\_\_\_\_ Date

To: **Pag-IBIG FUND COMMITTEE ON DISPOSITION OF ACQUIRED ASSETS**

Relative to the sale of Pag-IBIG Fund acquired assets under Negotiated Sale with Publication Batch No. \_\_\_\_\_, I/We hereby submit my/our offer to purchase the property/ies as described below subject to the terms and conditions of the Omnibus Guidelines Implementing the Sale of Pag-IBIG Fund Acquired Assets Program:

1. Mode of Sale:  Retail Sale       Bulk Sale       Group Sale
2. Location of the Property (if multiple properties, please attach list of properties to purchase):  
\_\_\_\_\_  
\_\_\_\_\_ Property Number: \_\_\_\_\_
3. Minimum Selling Price: \_\_\_\_\_ (P\_\_\_\_\_)
4. **Offered Price (must be equal to or higher than the Minimum Gross Selling Price):** \_\_\_\_\_ (P\_\_\_\_\_)
5. Mode of Payment:  Cash (to pay within 30 days from signing of Deed of Conditional Sale)  
 Short Term Installment (to pay within \_\_\_\_\_ months) (maximum of 12 months)  
 Long Term Installment (to pay within \_\_\_\_\_ years) (maximum of 30 years, not applicable for bulk sale) (please attached a copy of proof of income)

I/We certify that the information/statement indicated herein is to my/our knowledge, true, correct, complete and updated and I/We investigate and inspect the said property/ies before tendering this offer to purchase. The signature appearing below is genuine. Further, I/We hereby agree of the following:

- 1) to purchase the property/ies on “**As Is, Where Is**” basis on which I/we accept the physical condition of the property/ies including whether it is occupied or not;
- 2) to hold Pag-IBIG Fund free and harmless from liabilities of whatever kind and nature arising out of any legal claims which may be filed by third persons involving the property/ies;
- 3) that Pag-IBIG Fund has no commitment and makes no guaranty to approve the offer, as it is understood to be subject to final approval by Pag-IBIG Fund’s approving authorities.
- 4) that should my/our application be approved, notarial and all other fees pertaining to the purchase of the property/ies shall be for my/our account.

Further, I/we hereby agree and consent to the collection, generation, use, processing, storage and retention of my/our personal information for the purpose/s of acquiring a Pag-IBIG Fund acquired asset/s including the posting of my/our name/s in the Pag-IBIG Fund website in case I/we win on the negotiated sale. I/we understand that my/our personal information will be shared with other government agencies and to third parties as may be necessary, for the use of which shall be governed by the Republic Act No. 10173 also known as the “Data Privacy Act of 2012” and its implementing rules and regulations, I/we promise to notify Pag-IBIG Fund should there be any amendment or changes in my/our personal information indicated herein.

\_\_\_\_\_  
SIGNATURE OF OFFEROR  
OVER PRINTED NAME

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED  
REPRESENTATIVE OVER PRINTED NAME  
(IF ANY)

\_\_\_\_\_  
DATE

**Buyer Information (Please write in BLOCK LETTERS):**

<b>NAME OF BUYER</b> <i>Last Name                      First Name                      Name Extension (e.g. Jr., III)                      Middle Name                      Maiden Name</i>					<b>DATE OF BIRTH</b> <table border="1" style="width:100%; text-align: center;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> <tr> <td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>										m	m	d	d	y	y	y	y
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<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes, Housing Account Number (HAN) : _____ <input type="checkbox"/> No																
<input type="checkbox"/> Single/Unmarried <input type="checkbox"/> Widow/er <input type="checkbox"/> Annulled <input type="checkbox"/> Married <input type="checkbox"/> Legally Separated				<input type="checkbox"/> Male <input type="checkbox"/> Female		CITIZENSHIP																
Pag-IBIG MID NUMBER/RTN		SSS/GSIS ID NO.		TAXPAYERS ID NO. (TIN)		COMMON REFERENCE NO. (CRN)																
<b>NAME OF SPOUSE (IF MARRIED)</b> <i>Last Name                      First Name                      Name Extension (e.g. Jr., III)                      Middle Name                      Maiden Name</i>					<b>DATE OF BIRTH</b> <table border="1" style="width:100%; text-align: center;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> <tr> <td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>										m	m	d	d	y	y	y	y
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**Authorized Representative Information (if applicable) (Please write in BLOCK LETTERS):**

*(Note: Authorized Representatives must be armed with an SPA when transacting with Pag-IBIG Fund)*

<b>NAME OF AUTHORIZED REPRESENTATIVE</b> <i>Last Name                      First Name                      Name Extension (e.g. Jr., III)                      Middle Name                      Maiden Name</i>					<b>DATE OF BIRTH</b> <table border="1" style="width:100%; text-align: center;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> <tr> <td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>										m	m	d	d	y	y	y	y
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**THIS PORTION IS FOR Pag-IBIG FUND USE ONLY**

Reviewed by	Date	Remarks
Noted by Committee on Disposition of Acquired Assets		