



APPLICATION FOR CONDONATION OF PENALTIES/ADDITIONAL INTERESTS

Pag-IBIG MID Number/RTN									

(PRINT ALL ENTRIES IN BLOCK OR CAPITAL LETTERS.)

BORROWER'S DATA					
LAST NAME	FIRST NAME	EXTENSION NAME	MIDDLE NAME	HL ACCOUNT NO.	
<input type="checkbox"/> For full payment <input type="checkbox"/> For full updating	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	CITIZENSHIP	DATE OF BIRTH (mm/dd/yy)	MARITAL STATUS <input type="checkbox"/> Single/Unmarried <input type="checkbox"/> Legally Separated <input type="checkbox"/> Widow/er <input type="checkbox"/> Married <input type="checkbox"/> Annulled	
PERMANENT HOME ADDRESS				CONTACT DETAILS	
Unit/Room No., Floor	Building Name	Lot No., Blk No., Phase No., House No.	Street Name	<i>(Indicate country code if abroad)</i> COUNTRY + AREA CODE TELEPHONE NO. Home	
Subdivision	Barangay	Municipality/City	Province and State Country <i>(if abroad)</i>	Zip Code	<input type="text"/>
PRESENT HOME ADDRESS				Cell Phone	
Unit/Room No., Floor	Building Name	Lot No., Block No., Phase No., House No.	Street Name	<input type="text"/>	
Subdivision	Barangay	Municipality/City	Province and State Country <i>(if abroad)</i>	Zip Code	Email Address
EMPLOYER/BUSINESS ADDRESS				CONTACT DETAILS	
Unit/Room No., Floor	Building Name	Lot No., Block No., Phase No., House No.	Street Name	<i>(Indicate country code if abroad)</i> COUNTRY + AREA CODE TELEPHONE NO. Employer/Business (Direct Line)	
Subdivision	Barangay	Municipality/City	Province and State Country <i>(if abroad)</i>	Zip Code	<input type="text"/>
PREFERRED MAILING ADDRESS				Employer/Business (Trunk Line)	
<input type="checkbox"/> Permanent Home Address <input type="checkbox"/> Present Address <input type="checkbox"/> Employer/Business Address				<input type="text"/>	
				Employer/Business Email Address	
				<input type="text"/>	

CERTIFICATION	
<p>I certify that the foregoing information/statement is to my knowledge, true, correct, complete and updated. The signature appearing below is genuine. I authorize Pag-IBIG Fund or its duly authorized representative: 1) to conduct verification and such other actions/measures that it may consider appropriate to establish the correctness, validity and authenticity of all details stated on this document as well as the other documents I have submitted from whatever source; 2) to regularly submit and disclose my/our credit data (as defined under Republic Act No. 9510 and its Implementing Rules and Regulations) to Credit Information Corporation (CIC) as well as any updates or corrections thereof; 3) to share my/our credit data with other lenders authorized by the CIC, and credit reporting agencies duly accredited by the CIC; .</p> <p>I/We hereby agree that any falsification, misrepresentation or any similar acts committed, Pag-IBIG Fund shall automatically disapprove/cancel my application.</p>	
_____	_____
Borrower's Signature over Printed Name	Date

Documentary Requirements

For Full Payment:

- Duly accomplished Application for Condonation of Penalties/Additional Interests (HQP-HLF-540)

For Full Updating:

- Duly accomplished Application for Condonation of Penalties/Additional Interests (HQP-HLF-540)
- Photocopy copy of Updated Real Estate Tax Receipt/Clearance
- Photocopy of Tax Declaration of the property

NOTE: The Fund may require submission of additional requirement/s relative to the processing of the application. In case photocopy of requirements is submitted, the original copy of the documents shall be presented for authentication.