



# LOYALTY CARD PLUS APPLICATION FORM

Pag-IBIG MID NUMBER

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ISSUING PARTNER-BANK

### INSTRUCTIONS

- Accomplish this form in one (1) copy.
- Present at least one (1) valid ID acceptable to the Pag-IBIG Fund.
- Type or print all entries in BLOCK or CAPITAL LETTERS.
- The "NAME EXTENSION" shall refer to JR., II, III and the like
- Accomplish only the "PRESENT HOME ADDRESS" if it is different from the "PERMANENT HOME ADDRESS"
- On "CONTACT DETAILS" portion, indicate at least one (1) contact number.
- All fields which are marked with asterisk (\*) are mandatory

### \*MEMBERSHIP CATEGORY

MANDATORY		VOLUNTARY	
<input type="checkbox"/> EMPLOYED (PRIVATE)	<input type="checkbox"/> SELF-EMPLOYED	<input type="checkbox"/> EMPLOYED (FOREIGN GOVERNMENT)	<input type="checkbox"/> MEMBER OF COOPERATIVE/ TRADE UNION
<input type="checkbox"/> EMPLOYED (GOVERNMENT)	<input type="checkbox"/> PROFESSIONAL/BUSINESS OWNER	<input type="checkbox"/> BARANGAY OFFICIAL/EMPLOYEE	<input type="checkbox"/> OVERSEAS FILIPINO IMMIGRANT
<input type="checkbox"/> EMPLOYED PRIVATE HOUSEHOLD	<input type="checkbox"/> JOB ORDER PERSONNEL	<input type="checkbox"/> NON-WORKING SPOUSE	<input type="checkbox"/> OTHERS, <i>Please specify</i>
<input type="checkbox"/> OVERSEAS FILIPINO WORKER (OFW)	<input type="checkbox"/> OTHER EARNING GROUPS (OEG)	<input type="checkbox"/> MEMBER OF RELIGIOUS GROUP	
		<input type="checkbox"/> PENSIONER/INVESTOR/LESSOR	

### MEMBER'S PERSONAL DETAILS

*LAST NAME	*FIRST NAME	*NAME EXT. (e.g., Jr., II)	*MIDDLE NAME	*MAIDEN NAME (For married women)
*DATE OF BIRTH m m d d y y y y		*CITIZENSHIP	*MARITAL STATUS <input type="checkbox"/> Single/Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Widow/er <input type="checkbox"/> Annulled <input type="checkbox"/> Legally Separated	TAXPAYERS IDENTIFICATION NUMBER (TIN) - - - - - SSS/GSIS NUMBER - - - - -
*PLACE OF BIRTH (City/Municipality/Province/Country) (Please indicate country if born outside the Philippines)		*SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	EMPLOYEE NUMBER - - - - - <i>For AFP/PNP Employee, Serial/Badge No.</i> - - - - - <i>For DepEd Employee, Division Code-Station Code</i> - - - - -	
*MOTHER'S MAIDEN NAME				
*NAME OF SPOUSE (if married) (Last Name, First Name, Name Ext., Middle Name)				
COMMON REFERENCE NUMBER (CRN) - - - - -				

### ADDRESS AND CONTACT DETAILS

*PERMANENT HOME ADDRESS Unit/Room No., Floor Lot No., Block No., Phase No. House No. Street Name Subdivision				(Indicate country code if abroad) COUNTRY + AREA CODE + TELEPHONE NUMBER Home - - - - -	
Barangay	Municipality/City	Province/State/Country (if abroad)	ZIP Code	*Cell Phone - - - - -	- - - - -
*PRESENT HOME ADDRESS Unit/Room No., Floor Lot No., Block No., Phase No. House No. Street Name Subdivision				Business (Direct Line) - - - - -	
Barangay	Municipality/City	Province/State/Country (if abroad)	ZIP Code	Business (Trunk Line) - - - - -	Local - - - - -
*Email Address: _____					

### PRESENT EMPLOYMENT DETAILS (if with more than (1) employer, use separate sheet and follow format below)

*EMPLOYER/BUSINESS NAME				Monthly Income Range <input type="checkbox"/> Less than P5,000 <input type="checkbox"/> P5,000 to less than P15,000 <input type="checkbox"/> P15,000 to less than P25,000 <input type="checkbox"/> P25,000 to less than P35,000 <input type="checkbox"/> P35,000 to less than P50,000 <input type="checkbox"/> P50,000 or more	
*EMPLOYER/BUSINESS ADDRESS Unit/Room No., Floor Building Name Lot No., Block No., Phase No. House No.					
Street Name	Subdivision	Barangay	*OCCUPATION		
Municipality/City	Province	*State/Country (if abroad)	ZIP Code	*NATURE OF WORK/ BUSINESS/ SOURCE OF FUNDS	
*EMPLOYMENT STATUS <input type="checkbox"/> Permanent/Regular <input type="checkbox"/> Casual <input type="checkbox"/> Contractual <input type="checkbox"/> Project-Based <input type="checkbox"/> Part-Time/Temporary					

### \*PREVIOUS EMPLOYMENT FROM DATE OF Pag-IBIG FUND MEMBERSHIP (Use another sheet if necessary)

1	EMPLOYER/BUSINESS NAME					
	EMPLOYER/BUSINESS ADDRESS				FROM m m d d y y y y	TO m m d d y y y y
2	EMPLOYER/BUSINESS NAME					
	EMPLOYER/BUSINESS ADDRESS				FROM m m d d y y y y	TO m m d d y y y y

**\*OTHER INFORMATION**

<b>STATUS OF HOME OWNERSHIP</b> <input type="checkbox"/> Owned <input type="checkbox"/> Renting <input type="checkbox"/> Living with Parents/Relatives <input type="checkbox"/> Mortgaged <input type="checkbox"/> Pag-IBIG Fund <input type="checkbox"/> Banks and Other Financial Institution  If mortgaged with Bank or other Financial Institution, are you interested to transfer your Loan to Pag-IBIG Fund? _____ Yes      _____ No		<b>FUTURE PLANS ON HOME OWNERSHIP</b> <input type="checkbox"/> Purchase a Residential Unit through Personal Fund <input type="checkbox"/> Avail of a Loan for Purchase of Residential Unit or Construction of House <input type="checkbox"/> Renovate the current house through availment of loan <input type="checkbox"/> Continue to rent <input type="checkbox"/> Continue to live with parents/relatives
<b>DESIRED LOAN AMOUNT (IF INTERESTED WITH PAG-IBIG FUND FINANCING)</b> <input type="checkbox"/> Less than P750,000 <input type="checkbox"/> P750,000 up to P1,700,000 <input type="checkbox"/> Above P1,700,000 up to P3,000,000 <input type="checkbox"/> Above P3,000,000 up to P6,000,000	<b>HOW MUCH CAN YOU AFFORD IN TERMS OF MONTHLY PAYMENT FOR HOUSING LOAN?</b> <input type="checkbox"/> Less than P5,000 per month <input type="checkbox"/> P5,000 to less than P10,000 per month <input type="checkbox"/> P10,000 to less than P15,000 per month <input type="checkbox"/> P15,000 and above per month	<b>EDUCATIONAL ATTAINMENT</b> <input type="checkbox"/> Elementary <input type="checkbox"/> High School <input type="checkbox"/> College/Bachelor's Degree <input type="checkbox"/> Master's/Doctoral Degree <input type="checkbox"/> Vocational
<b>NO. OF CHILDREN/DEPENDENTS STILL STUDYING</b>	<b>NO. OF VEHICLES OWNED</b>	<b>ESTABLISHMENT YOU WISH TO BE A Pag-IBIG LOYALTY CARD PARTNER</b>

**AGREEMENT**

I hereby certify that the information given and all statements made herein are true and correct. I agree that the information I have provided may be used or shared with third parties conducting surveys, marketing activities or promotional offers of Pag-IBIG Fund and its partners. Any promotional offer of Pag-IBIG Fund may be emailed to me at the provided email address. Any telephone calls I make to Pag-IBIG Fund may be monitored and recorded for the purpose of providing quality customer service. In case of falsification, misrepresentation or any similar acts committed by the applicant Pag-IBIG Fund shall automatically suspend the benefits that can be secured through this card indefinitely.

I hereby agree to abide with the terms and conditions of this card program, including the terms and conditions of the card and the privacy policy of the accredited Partner-Bank. In the event that I do not abide with the terms and conditions of this program, the Pag-IBIG Fund has the right to deny me of any benefit under this card program.

I hereby authorize the Pag-IBIG Fund, its agents and representatives, upon application for any benefit relating to or under this card program, to conduct investigation deemed appropriate to ascertain my credit standing and financial capability in evaluating availment of such benefit; including but not limited to, request consumer reporting or reference agencies for consumer reports of my credit history and to disclose, submit, share or exchange any of my account information and reports to consumer reporting or reference agencies, government regulatory agencies, other banks, merchant partners or third party. The Credit information may also be transferred to service providers such as TransUnion (TU), Bankers Association of the Philippines – Credit Bureau, Credit Information Corporation, etc. Likewise, I hereby authorize the Fund, to disclose, submit or share my account information to the accredited Partner-Bank for the purpose of account opening and other bank transactions and in compliance with the Know-Your-Client requirements of the Bangko Sentral ng Pilipinas (BSP) and R.A. No. 10173 (Data Privacy Act of 2012). I agree to advise the Partner-Bank in writing of any change in the above information.

I hereby agree to the disclosures to be made by Pag-IBIG Fund in connection with this Agreement, provided the same are not contrary to law and public policy.

\_\_\_\_\_  
SIGNATURE OF MEMBER

\_\_\_\_\_  
DATE

**NOTES:**

1. If you do not wish to receive emails containing promotional offers or find any incorrect information, you may send an email at [contactus@pagibigfund.gov.ph](mailto:contactus@pagibigfund.gov.ph) or call Tel. (02) 8724-4244.
2. Your Pag-IBIG Loyalty Card Plus is not a government-issued I.D., but may be used in all Pag-IBIG Fund transactions.
3. If your mode of payment is through Deduction from Loan Proceeds, no cash payment shall be collected.

**THIS PORTION IS FOR Pag-IBIG FUND LOYALTY CARD ENROLLMENT KIOSK ONLY**

**RECEIPT OF APPLICATION**

<b>MODE OF PAYMENT</b> <input type="checkbox"/> CASH <input type="checkbox"/> DEDUCTION FROM LOAN PROCEEDS	<b>APPLICATION THRU</b> <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> EMPLOYER	<b>TYPE OF ID PRESENTED</b>
<b>RECEIVED BY</b>	<b>DATE</b>	<b>REMARKS</b>

**LIST OF VALID IDs ACCEPTABLE TO THE Pag-IBIG FUND/BANKS**

1. Passport 2. Driver's License 3. Professional Regulation Commission (PRC) ID 4. National Bureau of Investigation (NBI) Clearance 5. Police Clearance 6. Postal ID 7. Voter's ID 8. Barangay Certificate or Barangay IDs or similar documents bearing picture of the Member 9. Government Services Insurance System (GSIS) e-Card	10. Social Security System (SSS) Card 11. Senior Citizen Card 12. Overseas Workers Welfare Administration (OWWA) ID 13. Overseas Filipino Worker ID 14. Seaman's Book or Seafarer's Identification and Record Book (SIRB) 15. Alien Certification of Registration/Immigrant Certificate of Registration 16. Government Office and GOCC ID, e.g. AFP ID Pag-IBIG Fund Loyalty Card and Loyalty Card Plus (in case of recarding)	17. Certification from the National Council for the Welfare of Disabled Persons (NCWPD) 18. Department of Social Welfare and Development (DSWD) Certification 19. Integrated Bar of the Philippines ID 20. <b>Philippine Identification (PhilID) Card</b> 21. Company ID issued by Private Entities or Institutions Registered with or supervised or regulated either by the BSP, SEC or IC
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