



AUTHORIZED REPRESENTATIVE INFORMATION SHEET

(PRINT ALL ENTRIES IN BLOCK OR CAPITAL LETTERS)

AUTHORIZED REPRESENTATIVE'S DATA					
LAST NAME		FIRST NAME		NAME EXTENSION	MIDDLE NAME
RELATIONSHIP TO THE MEMBER-APPLICANT/BORROWER/BUYER/SELLER <input type="checkbox"/> Consanguinity/Affinity _____ (Please indicate relationship to Member-applicant/Borrower/Co-Borrower/Buyer/Seller) <input type="checkbox"/> Attorney-In-Fact to _____ (Please indicate name of Member-applicant/Borrower/Co-Borrower/Buyer/Seller)				DATE OF BIRTH (mm/dd/yy)	CITIZENSHIP
EE SSS/GSIS ID No.		TIN		SEX <input type="checkbox"/> M <input type="checkbox"/> F	MARITAL STATUS <input type="checkbox"/> Single/Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Widow/er <input type="checkbox"/> Legally Separated <input type="checkbox"/> Annulled
PERMANENT HOME ADDRESS Unit/Room No., Floor Building Name Lot No., Blk No., Phase No., House No. Street Name Subdivision Barangay Municipality/City Province and State Country (if abroad) ZIP Code					AUTHORIZED REPRESENTATIVE'S CONTACT DETAILS (Indicate country code if abroad) COUNTRY + AREA CODE TELEPHONE NO. Home _____ Cell Phone _____ Email Address _____
PRESENT HOME ADDRESS Unit/Room No., Floor Building Name Lot No., Block No., Phase No., House No. Street Name Subdivision Barangay Municipality/City Province and State Country (if abroad) ZIP Code					
MISCELLANEOUS (Answer the following questions with YES or NO. If your answer is YES, please elaborate on the details as required)					
Have you ever been assigned as Pag-IBIG Fund's authorized housing loan representative in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate the previous number of housing loan accounts you have represented.					
Are you being compensated by the Housing Loan Applicant as Attorney-in-fact? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please indicate the creditor's name, nature and amount involved.					
Are there past or pending cases against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please indicate the nature, plaintiff, amount involved and the status.					
CHARACTER REFERENCES					
NAME		ADDRESS			TEL. NO.
CERTIFICATION					
I hereby certify that the foregoing information/statement is to my knowledge, true, correct, complete, and updated. The signature appearing above my printed name below is genuine.					
I authorize Pag-IBIG Fund to share my personal information with other government agencies and third parties, as may be necessary in the management of his/her/their account/s, subject to the limits under Republic Act No. 10173 (Data Privacy Act of 2012), and its Implementing Rules and Regulations. Further, I promise to notify Pag-IBIG Fund of any amendments or changes in my personal information indicated herein.					
I hereby certify that I do not represent a counter party in any transaction related to Housing Loan application, and that I am not an attorney-in-fact or employee of a vendor/real estate broker representing the vendor or has business interest for a vendor/contractor/broker, etc., that may be engaged in the procurement of the loan with Pag-IBIG Fund; and if I do, I must fully disclose such interests in the form.					
I hereby state whether I am compensated/not compensated by the Housing Loan Applicant as Attorney-in-fact.					
I hereby agree that any misrepresentation of a material fact is a ground for disapproval of the application, cancellation of the loan, and shall be a cause for the total outstanding obligation to be due and demandable and shall be subject to other sanctions provided in existing Pag-IBIG Fund guidelines. I agree to notify Pag-IBIG Fund of any material change affecting the information contained herein. I agree that all information obtained by Pag-IBIG Fund shall remain its property whether or not the loan is granted.					
I further agree to be bound by the current and general policies of Pag-IBIG Fund and those that the Pag-IBIG Fund may adopt in the future, that may have relation to or in any way affect his/her/their loan.					
I understand that the processing/service/filing fee, notarial and all other fees pertaining to the registration of mortgage on property shall be for his/her/their account.					
_____ SIGNATURE OVER PRINTED NAME OF AUTHORIZED REPRESENTATIVE					
_____ DATE					

THIS FORM CAN BE REPRODUCED. NOT FOR SALE.