PSBank
PHILIPPINE SAVINGS BANK
Metrobank Group

BROKER'S ACCREDITATION FORM

Personal Data:

Name: _____ Home / Office Number: _____

Residential Address: _____

_____ Licensed Broker since _____

Email Add: _____ Mobile Number: _____

Civil Status: _____ Age: _____ Sex: _____ Birthdate: _____/_____/ _____

Broker's license No.: _____Expiry Date_____ Place Issued_____

TIN: _____ VAT ☐ Non-VAT ☐

Do you or your spouse have a relative (up to 2nd degree i.e. children, parents/parents-in-law, children-in-law, brothers/sisters, brothers/sisters-in-law) working at PSBank or in any entity under Metrobank Group/GT Capital Holdings, Inc.? ( ) Yes ( ) No

If yes, Name _____ _____ Relationship _____

Position (Officer, Director, Stockholder): _____ Rank (if Officer): _____

Realty Record: Years in Operation _____

Realty Name: _____ Telephone Number(s) : _____

Realty Address: _____

TIN: _____ VAT ☐ Non-VAT ☐

Real Estate Target:

Field of Specialization: ( ) Subdivision ( ) Townhouse ( ) High Rise Condo ( ) Vacant Lots

Area of Concentration: ( ) Metro Manila ( ) South Luzon ( ) North Luzon ( ) Others _____

Character References:

Name	Company Name	Position	Tel. No.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I certify that the information provided are true, complete and correct and that I undertake to inform PSBank of any changes therein. I understand and agree that any false representations shall be subject to the revocation of my accreditation and forfeiture of commission, without prejudice to other remedies provided by the law and equity.

In providing the foregoing information as part of the accreditation process, I authorize PSBank, without need of prior notice, to receive, use, process, store, profile and/or share to any of its affiliates and/or subsidiaries within the Metrobank Group, or its agents or service providers, or third parties which provide related services or have contractual obligations with PSBank, or any government agency/regulatory body, which in turn is/are authorized to receive the information, including but not limited to personal circumstances, privileged information, sensitive personal information, dates of application and accreditation, and any and all other information pertaining to my application as an accredited broker/sales agent of PSBank, for the following purposes: a) in order to commence and facilitate the application process for accreditation; b) for the protection of the applicant and PSBank against fraudulent, unauthorized or illegal transactions; c) in the validation, verification and/or updating of the information and related documents; d) in order for PSBank to enforce its rights or perform its obligations by reason of any law, rules and regulations, contract, or orders from any court or quasi-judicial and administrative offices with the corresponding duty to keep such information confidential in accordance with PSBank's Data Privacy Policy; e) in the prosecution or defense of PSBank or its directors, officers, employees with regard to disputes or claims pertaining to the products and services of PSBank.

In granting the above authorities and in order for PSBank to fully exercise the same, I hereby dispense any related rights accorded to me under Republic Act (RA) No. 10173 (Data Privacy Act of 2012) or other applicable laws, which are inconsistent with those authorities.

Requirements

1. Completely filled out Broker's Accreditation Form
2. Photocopies of the following:
   * Valid Broker's PRC License (front and back)
   * Certificate of Registration from BIR
   * Government Issued ID with date of birth
   * Invoice under the name of the broker
   * Valid Broker's Registration Certificate issued by PRC
   * AMLC Certificate of Registration

How did you learn about the Invitation? (please check those that apply)

( ) Ads:_____ ( ) PSBank staff/Friends_____ ( ) Broker's Association

( ) Others, Please specify : _____

I hereby certify that the above representations are true and correct.

_____ _____

Broker's Signature Date

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