

BROKERS ACCREDITATION FORM [CORPORATION / PARTNERSHIP]

Strategic Asset Management and Sales  
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☐ NEW APPLICATION

☐ RENEWAL

**PLEASE READ**  
The following information is required by the Bank in order for your application to be processed properly. It is important that all blanks are filled out. If not applicable, please indicate N/A. If you have any questions, we will be happy to assist you.

| A. COMPANY INFORMATION                                                  |                                                                                                                                                              |                                                                                                                                                                                                                                         |                                                                                 |                       |                                    |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------|------------------------------------|
| CORPORATE NAME                                                          |                                                                                                                                                              |                                                                                                                                                                                                                                         | SEC REGISTRATION NUMBER                                                         |                       |                                    |
| BUSINESS / TRADE NAME                                                   |                                                                                                                                                              |                                                                                                                                                                                                                                         | SEC REGISTRATION DATE                                                           |                       |                                    |
| COMPLETE PRINCIPAL OFFICE ADDRESS                                       |                                                                                                                                                              |                                                                                                                                                                                                                                         | TAX IDENTIFICATION NO.                                                          |                       |                                    |
| COMPLETE PRINCIPAL BUSINESS ADDRESS                                     |                                                                                                                                                              |                                                                                                                                                                                                                                         | VAT REGISTERED<br><input type="checkbox"/> VAT <input type="checkbox"/> NON VAT |                       |                                    |
| GROSS ANNUAL INCOME                                                     | OFFICE MOBILE NUMBER                                                                                                                                         | OFFICE LANDLINE                                                                                                                                                                                                                         | OFFICE EMAIL ADDRESS                                                            |                       |                                    |
| CREDIT INFORMATION                                                      |                                                                                                                                                              |                                                                                                                                                                                                                                         |                                                                                 |                       |                                    |
| BANK ACCOUNT ( BANK OF THE PHILIPPINE ISLANDS )<br>(1)<br><br>(2)       |                                                                                                                                                              | BANK ACCOUNT ( OTHER BANK (S) )<br>(1)<br><br>(2)                                                                                                                                                                                       |                                                                                 |                       |                                    |
| B. AUTHORIZED LICENSED REAL ESTATE BROKER'S INFORMATION                 |                                                                                                                                                              |                                                                                                                                                                                                                                         |                                                                                 |                       |                                    |
| LAST NAME                                                               |                                                                                                                                                              | FIRST NAME                                                                                                                                                                                                                              |                                                                                 | MIDDLE NAME           | SUFFIX                             |
| GENDER<br><input type="checkbox"/> Male <input type="checkbox"/> Female | CIVIL STATUS<br><input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Legally Separated <input type="checkbox"/> Widowed |                                                                                                                                                                                                                                         | BIRTHPLACE                                                                      | COUNTRY OF ORIGIN     |                                    |
| PRESENT RESIDENTIAL ADDRESS                                             |                                                                                                                                                              |                                                                                                                                                                                                                                         |                                                                                 |                       |                                    |
| PERMANENT RESIDENTIAL ADDRESS                                           |                                                                                                                                                              |                                                                                                                                                                                                                                         |                                                                                 |                       |                                    |
| DATE OF BIRTH                                                           | MOBILE NUMBER                                                                                                                                                | LANDLINE                                                                                                                                                                                                                                | EMAIL ADDRESS                                                                   |                       |                                    |
| CITIZENSHIP                                                             | TAX IDENTIFICATION NUMBER ( TIN )                                                                                                                            | VAT REGISTERED<br><input type="checkbox"/> VAT <input type="checkbox"/> NON VAT                                                                                                                                                         | PRC LICENSE NUMBER                                                              | PRC LICENSE EXP. DATE |                                    |
| GROSS ANNUAL INCOME ( estimate )                                        |                                                                                                                                                              | AMLC registered Designated Non -Financial Businesses and Professions [ choose one ]<br><input type="checkbox"/> Provisional Certificate of Registration [ 6 months expiration ]<br><input type="checkbox"/> Certificate of Registration |                                                                                 |                       | Date issued :<br><br>Date issued : |
| SPOUSE'S FULL NAME ( Last Name , First Name, Middle Name )              |                                                                                                                                                              |                                                                                                                                                                                                                                         |                                                                                 | DATE OF BIRTH         |                                    |
| MOTHER'S FULL MAIDEN NAME ( Last Name, First Name, Middle Name )        |                                                                                                                                                              |                                                                                                                                                                                                                                         |                                                                                 |                       |                                    |
| REAL ESTATE BOARD AFFILIATION                                           |                                                                                                                                                              | MEMBER SINCE                                                                                                                                                                                                                            | YEARS OF EXPERIENCE AS A LICENSED BROKER                                        |                       |                                    |
| CREDIT INFORMATION                                                      |                                                                                                                                                              |                                                                                                                                                                                                                                         |                                                                                 |                       |                                    |
| BANK ACCOUNT ( BANK OF THE PHILIPPINE ISLANDS )<br>(1)<br><br>(2)       |                                                                                                                                                              | CREDIT CARD ( BANK OF THE PHILIPPINE ISLANDS )<br>(1)<br><br>(2)                                                                                                                                                                        |                                                                                 |                       |                                    |
| BANK ACCOUNT ( OTHER BANK/S )<br>(1)<br><br>(2)                         |                                                                                                                                                              | CREDIT CARD ( OTHER BANK/S )<br>(1)<br><br>(2)                                                                                                                                                                                          |                                                                                 |                       |                                    |

B. CHECKLIST OF REQUIREMENTS

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>CORPORATION</p> <p>- Latest GIS, SEC Registration, Articles of Incorporation and By-Laws</p> <p>- Corporate Secretary's Certificate or Board Resolution</p> <p>- Latest Income Tax Return (ITR) / Audited Financial Statement / BIR Form 2303 (Corp)</p> <p>- Scanned valid gov't issued Identification Card with three specimen signature of all incorporators &amp; Corp Sec</p> <p>- Mayor's / Business permit from your Local Government Unit</p> <p>- Scanned copy of Invoice</p> | <p>PARTNERSHIP</p> <p>- Articles of Partnership and By-Laws</p> <p>- Scanned Gov't issued ID with three (3) specimen signature</p> <p>- Mayor's / Business permit from your Local Government unit</p> <p>- Scanned copy of Invoice</p> |
| <p>LICENSED REAL ESTATE BROKER</p> <p>- Scanned PRC REB License with three (3) specimen signature</p> <p>- Scanned Gov't issued ID with three (3) specimen signature</p> <p>- Valid AMLC Provisional COR or AMLC COR</p>                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                        |

| RELATIONSHIP TO BPI, AND BPI SUBSIDIARIES AND AFFILIATES, ETC ( in line with BSP Circular 749 )                                                                                                                                                                                                           |                              |                                                                                                                                                                                                                                                                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Are you a Director, Officer, or Stockholder (DOS), or any BPI subsidiary and/or affiliate?</p>                                                                                                                                                                                                         | <p>[ ] Yes</p> <p>[ ] No</p> | <p>If Yes, specify your company and position or affiliation.</p> <p>Company (e.g. BPI) _____</p> <p>Affiliation / Position (e.g. Director) _____</p> <p>_____</p>                                                                                                                                                                                                                                                     |
| <p>Are you related to a DOS of BPI, or any BPI subsidiary and/or affiliate (e.g. BPI Leasing, BPI Capital, BPI/MS, etc.) or the Ayala Group of Companies (e.g. Ayala Corp, Ayala Land Inc etc.)?</p> <p>Note:</p> <p>Please disclose all relationships; a separate sheet maybe attached if necessary.</p> | <p>[ ] Yes</p> <p>[ ] No</p> | <p>If yes, specify the name/s and relationship, such as, but not limited to: Spouse, Relative by consanguinity or affiliation (e.g. parent, child, brother, sister-in-law, grandparent, niece, uncle, first cousin etc.) or Others (e.g. general partner, co-owner of collateral, etc.).</p> <p>NAME / REL TO DOS / CO / POSITION</p> <p>e.g. Juan dela Cruz / First Cousin / BPI / AVP</p> <p>_____</p> <p>_____</p> |

AUTHORIZATION / CERTIFICATION

- By signing below, I/we acknowledge and agree to the following
1. All the statements, information and supporting documents provided by me/us in connection with this application are true, correct, complete and accurate.
  2. Where the information or data provided was collected by me/us from third party sources, the relevant consent of parties to whom such information relates has been obtained by me/us. I/We have likewise obtained, prior to submitting to the Bank information about individuals related to me/us (including their personal information) all necessary authorizations and consents required in compliance with applicable confidentiality and data privacy laws.
  3. Any material misrepresentations, falsity or omission herein which is misleading shall be construed as an act to defraud the Bank and may be a ground for the denial of my/our application or, if already granted, the cancellation or termination, without prejudice to such civil and/or criminal action that the Bank may pursue against me/us.
  4. All information and documents obtained, collected and processed by the Bank in connection with my/our application shall remain the property of the Bank.
  5. The Bank, its parent, Bank of the Philippine Islands (BPI) or any of BPI's subsidiaries and affiliates (collectively, the "BPI Group of Companies" and each, "a member of the BPI Group of Companies") may impose specific terms, conditions and requirements as the Bank or any member of the BPI Group of Companies may deem necessary or appropriate in connection with my/our availment of any of the Bank's or of any member of the BPI Group of Companies' products, services, facilities and channels. My/Our application, enrollment, availment, access, maintenance and continued use of any of the products, services, facilities and channels of the Bank or those of any member of the BPI Group of Companies shall constitute my/our acceptance and agreement to the applicable specific terms and conditions.
  6. I/We shall notify the Bank of changes in any of the information supplied by me/us or documents submitted in connection with this application.
  7. I/We agree to receive updates, notices and announcements on my/our application and/or any of the Bank's or any member of the Group of Companies' products, services, facilities and channels via SMS/text, email or fax transmission or such other means of communication deemed appropriate by the Bank or by any member of the BPI Group of Companies.

By signing this form, I/we agree that all personal information of individuals related to us, our transactions, business and credit relationships, accounts or account information, documents or records which are with the Bank, made available to the Bank or are in the Bank's possession or updated from time to time, may be collected, obtained, used, stored, consolidated, processed, profiled, benchmarked, verified, shared to and disclosed, by and between the Bank and any member of the BPI Group of Companies, their successors and assigns, and their respective authorized representatives, agents and service providers, and for any or all the purposes described in the Data Privacy Statement published at <https://www.bpi.com.ph> and deemed incorporated by reference in this form.

The foregoing constitutes my/our express consent under the applicable bank secrecy, confidentiality and data privacy laws of the Philippines and other jurisdictions **described in the Data Privacy Statement published at <https://www.bpi.com.ph>** and we agree to hold the Bank, each member of the BPI Group of Companies, the Program Partners and their respective directors, officers, employees, authorized representatives, agents and service providers, free and harmless from any and all liabilities, claims, damages, suits, costs, and expenses resulting from or in connection with the implementation of the purposes and authorities conferred by me/us hereunder.

Signature over printed name / date