



VEHICLE INFORMATION

MAKE/MODEL: \_\_\_\_\_SRP: \_\_\_\_\_DOWNPAYMENT: \_\_\_\_\_

AMOUNT FINANCED: \_\_\_\_\_TERM: \_\_\_\_\_SALES EXECUTIVE: \_\_\_\_\_

TYPE OF VEHICLE: ☐ PASSENGER CAR☐ AUV☐ LC☐ SUV☐ AUV☐ TRUCK  
☐ OTHERS (PLS. SPECIFY): \_\_\_\_\_

BRAND-NEW ☐  
USED ☐  
REFINANCE ☐

PERSONAL USE ☐  
BUSINESS USE ☐

PERSONAL INFORMATION

BORROWER'S NAME: \_\_\_\_\_BIRTHDATE (MM/DD/YYYY): \_\_\_\_\_PLACE OF BIRTH: \_\_\_\_\_

LAST \_\_\_\_\_FIRST \_\_\_\_\_MIDDLE \_\_\_\_\_

GENDER: ☐ MALE☐ FEMALEMARITAL STATUS: ☐ SINGLE☐ WIDOWER☐ ANNUED  
☐ MARRIED☐ SEPARATED

CITIZENSHIP: \_\_\_\_\_LANDLINE: \_\_\_\_\_  
ACR NO. (IF FOREIGNER) \_\_\_\_\_MOBILE: \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_YEARS IN PRESENT ADDRESS: \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_YEARS IN PERMANENT ADDRESS: \_\_\_\_\_

PROVINCIAL ADDRESS: \_\_\_\_\_YEARS IN PROVINCIAL ADDRESS: \_\_\_\_\_

RESIDENTIAL STATUS: ☐ OWNED☐ RENTED☐ MORTGAGED☐ WITH FAMILY  
☐ OTHERS (PLS. SPECIFY): \_\_\_\_\_

TIN NUMBER: \_\_\_\_\_  
SSS/GSIS NUMBER: \_\_\_\_\_

WORK/BUSINESS INFORMATION

EMPLOYMENT STATUS: ☐ PRIVATE☐ GOVT☐ OPW☐ SELF-EMPLOYE☐ LICENSED PROFESSIONAL☐ RETIRED

LEGAL FORM ☐ SINGLE PROPRIETORSHIP☐ CORPORATION☐ PARTNERSHIP

PRESENT EMPLOYER/BUSINESS NAME: \_\_\_\_\_EMPLOYER INDUSTRY/BUSINESS TYPE: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_

PRESENT EMPLOYER/BUSINESS/PLANT ADDRESS: \_\_\_\_\_LANDLINE: \_\_\_\_\_  
FAX NUMBER: \_\_\_\_\_  
COMPANY E-MAIL: \_\_\_\_\_

YEARS WITH PRESENT EMPLOYER: \_\_\_\_\_IF SELF-EMPLOYED/CORPORATE YRS. OF OPERATING BUSINESS: \_\_\_\_\_POSITION/DEPARTMENT: \_\_\_\_\_

SPOUSE / CO-MAKER INFORMATION

CO-MAKER'S NAME: \_\_\_\_\_BIRTHDATE (MM/DD/YYYY): \_\_\_\_\_PLACE OF BIRTH: \_\_\_\_\_

LAST \_\_\_\_\_FIRST \_\_\_\_\_MIDDLE \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_YEARS IN PRESENT ADDRESS: \_\_\_\_\_TIN NUMBER: \_\_\_\_\_  
SSS/GSIS NUMBER: \_\_\_\_\_

LANDLINE: \_\_\_\_\_MOBILE NUMBER: \_\_\_\_\_E-MAIL ADDRESS: \_\_\_\_\_

PRESENT EMPLOYER/BUSINESS NAME: \_\_\_\_\_EMPLOYER INDUSTRY/BUSINESS TYPE: \_\_\_\_\_

PRESENT EMPLOYER/BUSINESS ADDRESS: \_\_\_\_\_

YEARS WITH PRESENT EMPLOYER: \_\_\_\_\_IF SELF-EMPLOYED. YRS. OF OPERATING BUSINESS: \_\_\_\_\_COMPANY E-MAIL: \_\_\_\_\_  
POSITION/DEPARTMENT: \_\_\_\_\_

POSITION/DEPARTMENT: \_\_\_\_\_EMPLOYMENT STATUS: ☐ PRIVATE☐ GOVT☐ OPW☐ LICENSED PROFESSIONAL  
☐ SELF-EMPLOYED  
☐ RETIRED

CHILDREN'S INFORMATION

NAME	AGE	SCHOOL	GRADE/LEVEL

FINANCIAL STANDING

MONTHLY INCOME			MONTHLY EXPENSES	
SOURCE OF INCOME	BORROWER	SPOUSE	DESCRIPTION OF EXPENSES	AMOUNT
SALARIES			RENTAL EXPENSE	
ALLOWANCES			HOUSEHOLD EXPENSE	
COMMISSIONS			EDUCATION EXPENSE	
INTERESTS/DIVIDENDS			LOAN AND CREDIT EXPENSE	
			OTHERS (PLS. SPECIFY)	
TOTAL MONTHLY INCOME:			TOTAL MONTHLY EXPENSES:	

BANK REFERENCES

BANK/BRANCH	TYPE OF ACCOUNT (CHECKING/SAVINGS/TIME DEPOSIT)	CURRENT BALANCE

BANK AND FINANCIAL INSTITUTION INFORMATION

NAME OF BANK/FINANCIER	TYPE OF BORROWING	INTEREST RATE %	CREDIT LINE	BALANCE	MATURITY	SECURITY
LEASING SHAREHOLDER						
OTHER COMPANIES						
TOTAL						

VEHICLES OWNED

VEHICLE TYPE	YEAR/MODEL	BODY TYPE	BANK (IF MORTGAGED)

PERSONAL REFERENCES

NAME	ADDRESS	RELATIONSHIP	LANDLINE/MOBILE NUMBER

MAJOR SHAREHOLDERS AND MANAGEMENT TEAM

NAME	SHAREHOLDING RATIO (%)	TITLE	EDUCATION	EXPERIENCES

NUMBER OF EMPLOYEES AND OTHER COMPANY INFORMATION

CATEGORY	QUANTITY	CORPORATE TIN NUMBER: _____
SUPERVISORS:		COMPANY SEC NUMBER: _____
WORKERS:		
BACK OFFICE STAFF:		
TOTAL:		

COST OF OPERATING EXPENDITURES

ITEM	CONSUMPTION PER MONTH	ITEM	CONSUMPTION PER MONTH
OFFICER WAGE		RENTAL	
UTILITIES		BANK PAYMENT	
TRANSPORT		OTHERS	

PRODUCTION AND SALES AMOUNT

PRODUCTS	% OF PRODUCT	% VAT ISSUED	% EXPORTED

MAJOR SUPPLIERS (USE SEPARATE SHEETS IF NECESSARY)

NAME	BUSINESS LINE	PHONE NUMBER	CONTACT PERSON/TITLE	PURCHASED PRODUCT/%	TRADE YR.

TOTAL NUMBER OF SUPPLIERS (%): \_\_\_\_\_ DOMESTIC PURCHASE (%): \_\_\_\_\_ IMPORT (%): \_\_\_\_\_

MAJOR CUSTOMERS (USE SEPARATE SHEETS IF NECESSARY)

NAME	BUSINESS LINE	PHONE NUMBER	CONTACT PERSON/TITLE	PURCHASED PRODUCT/%	TRADE YR.

TOTAL NUMBER OF BUYERS (%): \_\_\_\_\_ DOMESTIC SALES (%): \_\_\_\_\_ FOREIGN SALES (%): \_\_\_\_\_

AFFILIATED COMPANIES (USE SEPARATE SHEETS IF NECESSARY)

NAME	BUSINESS LINE	SET-UP YEAR	MAJOR SHAREHOLDER	CAPITAL REGULAR	CAPITAL PAID-UP	NET WORTH	NET SALES	NET PROFIT	FINANCIAL LIABILITIES

DECLARATION

I / we certify that all above information are true and correct to the best of my knowledge. I / We authorize you to investigate the above information from whatever sources you may consider appropriate. I / We agree that all pertinent information obtained from any party whatever or not the loan is granted.

SIGNATURE OF BORROWER/S

DATE:

SIGNATURE OF SPOUSE / CO-MAKI

DATE:

CONSENT TO VERIFY BANK DEPOSIT

To whom it may concern:

I/We hereby authorize Chailease Berjaya Finance Corporation and its representatives to conduct checking on Bank Account/s

Bank

Branch

Account No.

I/ We appreciate the bank' s assistance in this matter and thank you in advance for your cooperation.

Sincerely,

(Signature Over Printed Name)