



LOYALTY CARD PLUS APPLICATION FORM

Pag-IBIG MID NUMBER

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INSTRUCTIONS

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

*MEMBERSHIP CATEGORY

MANDATORY		VOLUNTARY	
<input type="checkbox"/> EMPLOYED <input type="checkbox"/> PRIVATE <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> PRIVATE HOUSEHOLD <input type="checkbox"/> OVERSEAS FILIPINO WORKER (OFW)	<input type="checkbox"/> SELF-EMPLOYED <input type="checkbox"/> PROFESSIONAL/BUSINESS OWNER <input type="checkbox"/> JOB ORDER PERSONNEL <input type="checkbox"/> OTHER EARNING GROUPS (OEG) <i>Please specify: _____</i> <input type="checkbox"/> OTHERS, <i>please specify:</i> _____	<input type="checkbox"/> EMPLOYED <input type="checkbox"/> EMPLOYEE OF FOREIGN GOVERNMENT <input type="checkbox"/> BARANGAY OFFICIAL/EMPLOYEE <input type="checkbox"/> OTHERS, <i>please specify</i> _____	<input type="checkbox"/> INDIVIDUAL PAYOR <input type="checkbox"/> MEMBER OF COOPERATIVE <input type="checkbox"/> MEMBER OF TRADE UNION <input type="checkbox"/> NON-WORKING SPOUSE <input type="checkbox"/> MEMBER OF RELIGIOUS GROUP <input type="checkbox"/> OVERSEAS FILIPINO IMMIGRANT <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 <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td><td>y</td><td>y</td><td></td><td></td> </tr> </table>												m	m	d	d	y	y	y	y			*CITIZENSHIP	*MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Legally Separated <input type="checkbox"/> Annulled/Nullified <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	NATIONAL ID CARD NUMBER TAXPAYER IDENTIFICATION NUMBER (TIN) SSS/GSIS NUMBER <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> EMPLOYEE NUMBER <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> For AFP/PNP Employee, Serial/Badge No. <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> For DepEd Employee, Division Code-Station Code <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																																																																
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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
Barangay Municipality/City Province/State/Country (if abroad) ZIP Code	Home : _____ *Cell Phone : _____ *Email Address : _____ Viber : _____ Facebook Messenger : _____ WhatsApp : _____ Telegram : _____ WeChat : _____
*PRESENT HOME ADDRESS Unit/Room No., Floor Lot No., Block No., Phase No., House No. Street Name Subdivision	
Barangay Municipality/City Province/State/Country (if abroad) ZIP Code	

PRESENT EMPLOYMENT DETAILS (if with more than one (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.	*OCCUPATION
Street Name Subdivision Barangay	
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 <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td><td>y</td><td>y</td><td></td><td></td> </tr> </table>											m	m	d	d	y	y	y	y			TO <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>m</td><td>m</td><td>d</td><td>d</td><td>y</td><td>y</td><td>y</td><td>y</td><td></td><td></td> </tr> </table>											m	m	d	d	y	y	y	y	
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I allow Pag-IBIG Fund to consolidate/merge my records, if applicable.

***OTHER INFORMATION**

STATUS OF HOME OWNERSHIP <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		FUTURE PLANS ON HOME OWNERSHIP <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
DESIRED LOAN AMOUNT (IF INTERESTED WITH Pag-IBIG FUND FINANCING) <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	HOW MUCH CAN YOU AFFORD IN TERMS OF MONTHLY PAYMENT FOR HOUSING LOAN? <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	EDUCATIONAL ATTAINMENT <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
NO. OF CHILDREN/DEPENDENTS STILL STUDYING	NO. OF VEHICLES OWNED	ESTABLISHMENT YOU WANT TO OFFER DISCOUNTS/FREEBIES
REASON/S FOR GETTING LCP <input type="checkbox"/> To be used as a financial card <input type="checkbox"/> To be used as a discount card <input type="checkbox"/> To be used as Pag-IBIG Transaction Card <input type="checkbox"/> Others, <i>please specify</i> _____	FREQUENCY OF TRAVEL ABROAD <input type="checkbox"/> Once a year <input type="checkbox"/> 2 to 5 times per year <input type="checkbox"/> More than 5 times per year <input type="checkbox"/> Rarely <input type="checkbox"/> Never	FREQUENCY OF DOMESTIC TRAVELS <input type="checkbox"/> Once a year <input type="checkbox"/> 2 to 5 times per year <input type="checkbox"/> More than 5 times per year <input type="checkbox"/> Rarely <input type="checkbox"/> Never

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.

I allow Pag-IBIG Fund to send me any updates, promotions, marketing, or programs offered by the Fund through my registered cell phone number, email address and/or messaging application.

SIGNATURE OF MEMBER

Date

THUMBMARKS OF MEMBER
(if unable to sign)

[LEFT THUMB] [RIGHT THUMB]

(To be done in the presence of Pag-IBIG Fund Personnel)

(Signature over Printed Name of Representative)

- NOTES:**
- 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 or call Tel. (02) 8724-4244.
 - Your Pag-IBIG Loyalty Card Plus is not a government-issued I.D., but may be used in all Pag-IBIG Fund transactions.

THIS PORTION IS FOR Pag-IBIG FUND MARKETING DIVISION - BRANCH/OFW CENTER ONLY

VERIFICATION OF RECORDS

VERIFIED BY:	DATE:	REMARKS:
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THIS PORTION IS FOR Pag-IBIG FUND PARTNER-BANK ENROLLMENT KIOSK ONLY

RECEIPT OF APPLICATION

MODE OF PAYMENT <input type="checkbox"/> CASH <input type="checkbox"/> DEDUCTION LOAN FROM PROCEEDS	APPLICATION THRU <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> EMPLOYER	REQUEST TYPE <input type="checkbox"/> NEW APPLICATION <input type="checkbox"/> RECARD APPLICATION	TYPE OF ID PRESENTED
VERIFIED BY:	DATE:	ISSUING PARTNER-BANK:	REMARKS:

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

1. National ID 2. Passport including those issued by foreign governments 3. Driver's License 4. Professional Regulation Commission (PRC) ID 5. National Bureau of Investigation (NBI) Clearance 6. Police Clearance 7. Postal ID 8. Voter's ID 9. Tax Identification Number (TIN) ID 10. Barangay Certificate or Barangay IDs or similar documents bearing picture of the Member	11. Government Service Insurance System (GSIS) e-Card 12. Social Security System (SSS) Card 13. Senior Citizen Card 14. Overseas Workers Welfare Administration (OWWA) ID 15. Overseas Filipino Worker ID 16. Seaman's Book or Seafarer's Identification and Record Book (SIRB) 17. Alien Certification of Registration/Immigrant Certificate of Registration	18. Government Office and GOCC ID, e.g., AFP ID, Pag-IBIG Fund Loyalty Card 19. ID issued by the National Council on Disability Affairs (NCDA) 20. Department of Social Welfare and Development (DSWD) Certification 21. Integrated Bar of the Philippines ID 22. Company ID issued by Private Entities or Institutions Registered with or supervised or regulated either by the BSP, SEC or IC 23. PhilHealth Health Insurance Card ng Bayan
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Note: The Partner-Bank, at any time, may request for additional ID, other than the submitted one, for purposes of validation.