



# CLIENT INFORMATION FORM

PLACE OF APPLICATION:

**PNB** (PLEASE PRINT ALL INFORMATION)

## CLIENT INFORMATION

**NAME OF DEPOSITOR**

Last Name

First Name

Middle Name

1" x 1"  
PICTURE  
(pls. attach)

SALUTATION:  Ms./Mrs  Mr.  Others \_\_\_\_\_

DATE OF BIRTH: (DD/MM/YYYY)

PLACE OF BIRTH:

NATIONALITY:

GENDER:  Male  Female

TIN :

SSS /GSIS ID No :

CIVIL STATUS:

MOTHER'S MAIDEN NAME:

PRESENT ADDRESS:

(Lot/Blk/House No./ Unit No.) (Street) (Subdivision) (Town/City) (State/Province) (Country) (Zip Code)

TELEPHONE NO. (Include Area Code)

PERMANENT ADDRESS:

(Lot/Blk/House No./ Unit No.) (Street) (Subdivision) (Town/City) (State/Province) (Country) (Zip Code)

TELEPHONE NO. (Include Area Code)

NAME OF EMPLOYER/NATURE OF WORK:

OCCUPATION:

MOBILE NUMBER:

BUSINESS/EMPLOYER'S ADDRESS:

EMAIL ADDRESS:

TELEPHONE NO. (Include Area Code)

SPOUSE'S NAME

SPOUSE'S OCCUPATION:

I affirm that the information given by me in this application is true and correct. I, hereby, allow PNB to verify and investigate said information and/or secure such other information as may be required by PNB. I have read and accepted the applicable terms and conditions and other agreements executed between the BANK and the DEPOSITOR.

\_\_\_\_\_  
SIGNATURE OF DEPOSITOR

### FOR PNB USE ONLY

IDs Presented

SHORT NAME (20 chars. Max.)

CATEGORY:

CUSTOMER ID NUMBER:

Recommended by: (Signature over Printed Name and Designation)

Processed by / Date:

Approved by / Date: