



# REMITTANCE APPLICATION FORM

Please print clearly. Provide all required information indicated by asterisk (\*).

SERVICING UNIT: _____	*Date: _____
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SENDER'S / REMITTER'S INFO	<input type="checkbox"/> Remitting on behalf of a remitter Remitter's Name: _____
	*Family Name: _____ *First Name: _____ Middle Name: _____
	*Birthdate (MM/DD/YYYY): _____ *SPECIFIC OCCUPATION: _____
	*Home Address: _____ *City: _____ *State: _____ *Zip Code: _____
	*Home Phone: _____ OR Mobile Phone: _____ Email Address: _____
	*SOURCE OF FUNDS: <input type="checkbox"/> Salary <input type="checkbox"/> Business Income <input type="checkbox"/> Savings <input type="checkbox"/> Pension <input type="checkbox"/> Investments <input type="checkbox"/> Retirement Plan <input type="checkbox"/> Proceeds from Loans <input type="checkbox"/> Others _____
	*MODES OF PAYMENT: <input type="checkbox"/> Cash <input type="checkbox"/> ACH Debit <input type="checkbox"/> Checks (Personal, Cashier's) <input type="checkbox"/> Debit/Credit Cards <input type="checkbox"/> Money Order
	*PURPOSE OF THE REMITTANCE: <input type="checkbox"/> Allowance <input type="checkbox"/> Financial Support <input type="checkbox"/> Home Improvement <input type="checkbox"/> Medical Expenses <input type="checkbox"/> Bills Payment <input type="checkbox"/> Others _____
	<b>NOTE:</b> Please complete the information on <b>any one</b> of the following documents and present the original for verification.
	<input type="checkbox"/> State ID <input type="checkbox"/> Driver's License: _____ *Issuing State**: _____ Expiry Date: _____ <input type="checkbox"/> RP <input type="checkbox"/> US Passport #: _____ Expiry Date: _____

BENEFICIARY INFORMATION	*Family Name: _____ *First Name: _____ Middle Name: _____
	Birthdate (MM/DD/YYYY): _____ *Remitter's relationship to the Beneficiary: _____
	*Home Address: _____
	*Home Phone: _____ Mobile Phone: _____ Email Address: _____ Occupation: _____
	<b>Remittance Instructions (check all that applies):</b> <input type="checkbox"/> Credit to PNB <input type="checkbox"/> Door-to-Door Delivery <input type="checkbox"/> Advise and Pay Anywhere (Pick Up in PNB Branch or Payout Partners) <input type="checkbox"/> Credit to Other Banks
	<input type="checkbox"/> PNB Branch Name: _____ PNB Peso Account # _____ PNB US Dollar Account # _____
	<input type="checkbox"/> Other Bank (indicate other bank name): _____ Other Bank Peso Account # _____ Other Bank US Dollar Account # _____

<b>I HEREBY CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.</b>	_____ <b>SENDER'S / REMITTER'S SIGNATURE / DATE</b>
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- Remittance of \$3000 (\$1000 in Arizona) & above are subject to additional information requirement.
  - Remittance Fee is subject to change without prior notice.
  - Check & ACH payments are subject to regular bank clearing days.
  - Rapid Remit applies only to Peso or Dollar accounts maintained in online PNB Branches and is subject to power failures, computer maintenance and natural calamities in the Philippines.
  - \*\* Valid States AK, AZ, CA, FL, HI, IL, IN, LA, MD, MO, NC, NJ, NV, OR, TX, WA, VA
- Ops/Nov2019