

Date:

BROKER REGISTRATION FORM

Paste Photo Here

APPLICATION TYPE: *	□ New Application	Broker License No.:			Here	
	□ Renewal	Expiry	Date:			
HOW DID YOU LEARN A			(*) required field			
PERSONAL INFORMATIO	N				_	
Name of Broker: *	SURNAME		FIRST		MIDDLE	
Date/Place of Birth: *(MM/DD/YY)		Na	ationality: *	Civil Status		
Address: *		Те	Telephone Nos.: * Fax			
		Mo	obile Phone Nos.:	Email Addr	Email Address:	
TIN*:			SSS / GSIS No.:			
FASTEST WAY TO CONTACT YOU?* TEL #			CELL#			
OCCUPATION / EMPLOY	MENT / BUSINESS INFOR	RMATION				
Company Name: *		De	Designation:			
Office Address: *		Te	Telephone No.: * Fax No.:			
Broker Affiliation/s :			Documents attached (Please check box)			
☐ PAREB ☐ CREBA ☐ REBAP ☐ OTHERS Other Companies Accredited With:			Requirements Checklist ☐ Certificate of Registration and/or Broker License ☐ VALID ID (SSS, GSIS, TIN, Driver's License, Passport)			
Other Companies Accredited with.			☐ 1 Copy of 2x2 Picture			
Business History as a Re	al Estate Broker:					
Year Properties Handled		led	Locations		Owner/Developer	
Properties Presently Beir						
Properties	Locations		Price Range		Owner/Developer	
	e above information and attachn ch other information as it may r			tion.	t of my knowledge and the	
FOR PNB-SAMG USE ONLY Received by:				2.3		

Remarks / Status: