

 		Credit Requirements: 2x2 ID Picture (Buyer and Co-maker) Proof of Income		Proof of Billing Residence Certificate/ Cedula	
CREDIT APPLICATION FORM					
First Name:		Middle Name:		Last Name:	Date:
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Age:	Citizenship:	Birth Date:	Religion:
Civil Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced/Separated <input type="checkbox"/> Widowed		TIN No:	Res Cert No.	Date Issued	Place Issued
Present Address:					Length of Stay
HOUSE <input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Mortgaged <input type="checkbox"/> Provided By _____ LOT <input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Mortgaged <input type="checkbox"/> Provided By _____ OTHER PROPERTIES <input type="checkbox"/> TV <input type="checkbox"/> Ref <input type="checkbox"/> Stereo/ Component <input type="checkbox"/> Gas Range <input type="checkbox"/> Motorcycle <input type="checkbox"/> Computers <input type="checkbox"/> Farm/Lot Address _____ Size _____					
Provincial Address:					
Home Phone Number		Office Phone Number		Mobile Phone Number	Email Address:
Name of Spouse (First/Middle/Last)		Age		Number of Dependents	
Provincial Address of Spouse:				Mobile No.	Email Address
Name of Dependents		AGE	Grade / Occupation Position		School/Company Employed
1.		1.	1.		1.
2.		2.	2.		2.
3.		3.	3.		3.
4.		4.	4.		4.
Name of Father			Name of Mother		
Address				Tel No / Mobile No	
Source of Income <input type="checkbox"/> Self-Employed/Business <input type="checkbox"/> Employed <input type="checkbox"/> Allotment <input type="checkbox"/> Provided by _____					
CREDIT REFERENCES(Preferably Installment Purchases/Cash Loan)					
STORE/BANK	ITEM/ LOAN AMOUNT	TERM	DATE	BALANCE	
_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	
PERSONAL REFERENCES					
NAME	RELATIONSHIP	TEL NO	ADDRESS		
_____	_____	_____	_____		
_____	_____	_____	_____		
_____	_____	_____	_____		
Name of Employer				Position	
Address				Tel No	
Date Employed				Salary (Net)	
Spouse Employer				Position	
Address				Tel No	
Date Employed				Salary (Net)	
UNIT TO BE USED FOR		<input type="checkbox"/> Personal Use	<input type="checkbox"/> Business Use	<input type="checkbox"/> Gift	<input type="checkbox"/> Used by Relative / Friend
MODE OF PAYMENT		<input type="checkbox"/> Post Dated Checks	<input type="checkbox"/> Cash Paid to Office	<input type="checkbox"/> Cash for Collection	<input type="checkbox"/> Credit Card

Co-Maker Information				
Name:		Age:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Home Address:			Tel No:	
Residence: <input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Mortgaged <input type="checkbox"/> Provided by _____				
Civil Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced/Separated <input type="checkbox"/> Widowed			Relationship w/ Applicant	
Birthday (mm/dd/yyyy)		TIN		Mobile No
Present Employer		Date Hired	Position	Tel No
Employer's Address			Employment Status <input type="checkbox"/> Contractual <input type="checkbox"/> Probationary <input type="checkbox"/> Regular	
Credit References (Installment/Banking Institutions)				
1. _____ 2. _____ 3. _____				
Sketch of Residence and/or Business Address: (Applicant)				
Sketch of Residence: (Co-Maker)				

This is to authorize Desmark and its representatives to perform credit inquiries and verify data written above.

_____ Co-buyer's Signature						_____ Spouse's Signature		_____ Applicant's Signature	
All Fields Below are to be filled up by Desmark Representatives only:									
Brand			Model			Color			
LCP	SRP	Downpayment	Del Charge	Total (Initial Payment)		OR No./ Date			
Term	Gross	Balance after Down		Due Date		PPD			
1 3 6 12 18 24 30 36 _____	Monthly Amort.	RECOMMENDATION <input type="checkbox"/> APPROVED <input type="checkbox"/> APPROVED W/ CONDITION <input type="checkbox"/> DISAPPROVED							
	_____	REMARKS:							
	_____	_____							
	_____	_____							
	_____	_____							
	_____	_____							
	_____	_____							
	_____	_____							
Credit Investigator			Supervisor			Manager/OIC			