



CUSTOMER INFORMATION SHEET (NON-INDIVIDUAL ACCOUNT)

ACCOUNT NUMBER **0000**

PERSONAL INFORMATION

BUSINESS NAME

NATURE/LINE OF BUSINESS **DATE OF REGISTRATION** **S.E.C. REG. NO.**

TAX IDENTIFICATION NUMBER **COUNTRY OF ORIGINAL REGISTRATION** **LOCATION OF BUSINESS**
 PHILIPPINES OTHERS _____ PHILIPPINES OTHERS _____

TYPE OF BUSINESS ORGANIZATION **FIRM SIZE**
 SOLE PROPRIETORSHIP FOREIGN GOVERNMENT/CONSULAR OFFICE/EMBASSY MICRO (ASSETS OF P3M AND BELOW)
 PARTNERSHIP EXECUTOR/ADMINISTRATIVE/ESTATE OF DECEASED SMALL (ASSETS OF >P3M TO P15M)
 PRIVATE CORPORATION STATUTORY BOARD/BOARD CREATED BY LAW MEDIUM (ASSETS OF >P15M TO P100M)
 PUBLIC CORPORATION (UNLISTED) OTHERS _____ LARGE (ASSETS OF MORE THAN P100M)
 PUBLIC CORPORATION (LISTED)
 UNREGISTERED ASSOCIATION/CLUB/SOCIETY/COOPERATIVE

ADDRESS(ES) AND PHONE NUMBER(S) (NOTE: PRIMARY BUSINESS ADDRESS SHOULD BE INDICATED ON THE SIGNATURE CARD. INDICATE OTHER ADDRESS(ES) BELOW)

TYPE BUSINESS POST-OFFICE BOX OTHERS

NO./BUILDING/STREET

BARANGAY/SUBDIVISION

CITY/COUNTRY **ZIP/POSTAL CODE**

PHONE NUMBER(S) **FAX NUMBER**

TYPE BUSINESS POST-OFFICE BOX OTHERS

NO./BUILDING/STREET

BARANGAY/SUBDIVISION

CITY/COUNTRY **ZIP/POSTAL CODE**

PHONE NUMBER(S) **FAX NUMBER**

OTHER PHONE NUMBER(S) (SPECIFY)

E-MAIL ADDRESS

LIST OF DIRECTORS AND/OR PARTNERS **POSITION**

LIST OF DIRECTORS AND/OR PARTNERS	POSITION

LIST OF CAPITAL STOCKHOLDERS WITH AT LEAST 2% SHARES OF STOCKS **PERCENTAGE OF STOCKS OWNED**

LIST OF CAPITAL STOCKHOLDERS WITH AT LEAST 2% SHARES OF STOCKS	PERCENTAGE OF STOCKS OWNED

BENEFICIAL OWNERS (IF ANY) **PERCENTAGE OF STOCKS OWNED**

FULLY OPERATIONAL FOR CLOSURE
 SEMI-OPERATIONAL OTHERS _____

I hereby certify that the above information are true and accurate. I understand that any false statement/information herein may be a ground for disapproval or immediate closure by the Bank of any account(s). I hereby agree to be governed by the terms and conditions of the Microfinance Maximum Savings Bank, as well as the laws of the Republic of the Philippines, rules and regulations set by the Banko Sentral ng Pilipinas and the Banker's Association of the Philippines relative to the establishment and operation of my account(s). I understand that the Bank reserves the right to close my account(s) should the Bank's interest so require.

AUTHORIZED SIGNATURE(S)

FOR BANK'S USE ONLY

CUSTOMER SUB-CLASSIFICATION
 PRODUCER/MANUFACTURER TRADING-GOODS/COMMODITIES COMMODITY EXPORTER SERVICES - LOCAL
 SERVICE EXPORTER PUBLIC UTILITY OTHERS (SPECIFY)

DOCUMENT TYPE (E.G. ID/PARTY IDENTIFIED)	DOCUMENT NO.	BANK RELATIONSHIP
A)		<input type="checkbox"/> NON-DORSI <input type="checkbox"/> DORSI, IF YES, WHAT POSITION
B)		<input type="checkbox"/> STOCKHOLDER <input type="checkbox"/> RELATED INTEREST
C)		

DOCUMENT CHECKLIST **EXCEPTIONS/REMARKS:**

<input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> DTI APPLICATION REGISTRATION <input type="checkbox"/> DTI CERTIFICATE OF REGISTRATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> ARTICLES OF CO-PARTNERSHIP <input type="checkbox"/> SEC CERTIFICATE OF REGISTRATION <input type="checkbox"/> PARTNERSHIP RESOLUTION	<input type="checkbox"/> CORPORATION/UNION/COOPERATIVE/ REGISTERED ASSOCIATION <input type="checkbox"/> ARTICLES OF INCORPORATION <input type="checkbox"/> BY-LAWS <input type="checkbox"/> CERTIFICATE OF REGISTRATION (SEC/DOLE/OTHER AGENCIES) <input type="checkbox"/> SEC. CERTIFICATE/BOARD RESOLUTION	<input type="checkbox"/> TREASURER-IN-TRUST <input type="checkbox"/> PROPOSED ARTICLES OF INCORPORATION <input type="checkbox"/> PROPOSED BY-LAWS <input type="checkbox"/> NOTARIZED TREASURER'S AFIDAVIT <input type="checkbox"/> UNREGISTERED ORGANIZATIONS <input type="checkbox"/> NOTARIZED ARTICLES OF ORGANIZATION <input type="checkbox"/> BY-LAWS <input type="checkbox"/> LIST OF DIRECTORS/TRUSTEES/OFFICERS <input type="checkbox"/> NOTARIZED RESOLUTION	EXCEPTIONS/REMARKS:
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DATE OFFICE PROCESSED BY CHECKED BY