

Purpose of Account Opening:

PERSONAL DETAILS	
Name	

First Name Date of Birth (mm/dd/yyyy)		Middle Name Place of Birth		Last Name		Suffix (e.g. Jr,Sr) Taxpayers Ident	Suffix (e.g. Jr,Sr) Nickname/Local Name Taxpayers Identification Number(TIN) - - - - - - -	
		Municipality/Cit	/	Province/ Country	/		UMID Number	
Marital Status	Gend	ler		Citizenship				
Single Legally Separated/ Wido				Philippines		Identification Ca	rd *Mandatory if alien	
Married Annulled/Divorced/	E Fei	male		Others:		Passport*	Driver's License	
Name of Spouse	Numb	Number of Dependents:		-			Voter's/Postal Police/ NBI Clearance Senior/ OFW Others: National ID	
First Name	Middle	e Name		Last Name	Suffix (e.g. Jr,S	Gr) Identification Ca	ard Number	
Mother's Maiden Name								
First Name	Middle	e Name		Last Name	Suffix (e.g. Jr,S	Gr)		
ADDRESS AND CONTACT DET	TAILS							
Preferred Mailing Address								
Present Permanent	Emp	loyer/Office or Busi	ness					
Present Address						Home Ownershi	p Length of Stay:yrs	
House/Floor/Unit No. Block No./Lot No.	House/Floor/Unit No. Block No./Lot No./Phase No./Bldg Name Street Name Subdivision/Villa			illage/Purok/Sitio/Barrio	Rented Mortgaged Family-owned			
Barangay Town/Municipality/City/District/State Province/Region Country Zip Code Permanent Address Same as Present Address Same as Present Address From the second secon						Company-own Home Ownershi		
House/Floor/Unit No. Block No./Lot No.	/Phase No./Bldg Na	ame	Street Nar	ne Subdivision/Vi	illage/Purok/Sitio/Barrio	Rented Mortgaged		
	y/City/District/Stat e Number		Province/F nergency (Region Country Contact Person	Zip Code	Family-owned Company-own Email Address	ed	
Area Code Phone Number		Ful	Name		Phone Number			
FINANCIAL INFORMATION								
Employment Status	Source of I	ncome			Employer or	Business Name (if Self-empl	oyed)	
Employed Student	Salary		Pensio					
Self-employed Others (Pls. specification of the self-employed Others (Pls. specification of the self-employed of t			Others	(Pls. Specify)				
Retired housewife		emittance Commission			— Position in Co	ompany Years i	n position	
Employer/ Business Address		commission						
Employer, business Address					Start Date w/	Present Emp. Or		
	D:	c:. / *			Your Busines			
Block/Lot No. Street Nature of Business/ Your Business/es	District Check as many)	City/Town		Province		Personal Monthly Incor	me	
Agriculture, Hunting and Forestry	Wholesale a	und Retail		Education		Under PHP 10,000		
Fishing	Hotels and F			Health and Soci	al Work			
Mining & Quarrying		torage & Communi	cation	<u> </u>	ity Social Service	□ ₱ 20,000 - ₱ 49,99		
Manufacturing		ermediation		Activities of Priv		□ ₱ 50,000 - ₱ 99,99		
 Electricity and Water Supply Construction 		Renting & other Bu nistration and Defe		Extra-Territoria	l Org. and Bodies	□ ₱ 100,000+		
			lise		(iii y)			
BENEFICIARIES	Deletiership	Netionality	Candan	Dirth Data	Dirth Die ee		Contest Number	
Name	Relationship	Nationality	Gender	Birth Date	Birth Place		Contact Number	
		1						
I hereby certify that the	foregoing in	 formation/stat	omente l	have provided	above are true an	d correct and that	any and all material	
	INTEROUDA INT	iormation/stat						
microprocontation chall be comet		act to defeaved	Dural Da	nk of Salana (NI V) Inc for which an		ability can be purched	
misrepresentation shall be const	ructed as an a							
against me. Any changes in the four line, to verify and investigate any	ructed as an a orgoing inform and all inform	nation shall preation given by	omptly be me whicl	e communicated t h the Bank may de	o the Bank. I hereby eem appropriate.	y authorize the Rural	Bank of Solano (N.V.),	
against me. Any changes in the fe	ructed as an a orgoing inform and all inform e read and un	nation shall pro ation given by derstood and	omptly be me whicl	e communicated t h the Bank may de	o the Bank. I hereby eem appropriate.	y authorize the Rural	Bank of Solano (N.V.),	

Signature over Printed Name				Date Signed
FOR BANK USE				
CIS Number	RPT	🗌 DOSRI		Application: new Updating *Date:
Customer is a PEP	Yes	No		Customer is included in the Bank's watch list: No Yes PEP
Risk rating	Low	Normal	High	
Customer Contact: Walk-in Referred Name & ID #:				Relationship:
Checked/Authenticated by: Date			Approved by:	Date

DIRECTIONAL MAP					
Complete Home Address:	Complete Business Address:				