



LOAN APPLICATION
COVID-19 Assistance to Restart Enterprises (CARES) Program

Application Details		
Requested Loan Amount:	Php _____	Application Date: ____/____/____ (mm/dy/yyyy)
Requested Loan Term: (no. of months)	_____	Repayment Mode: <u>Monthly</u>
Purpose of Loan:		
<input type="checkbox"/> Working capital replacement to ensure liquidity <input type="checkbox"/> For mortgage updating or anti-foreclosure assistance		
Personal Information		
Name:	_____ Last _____ First _____ Middle _____	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Civil Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed
Date of Birth:	____/____/____ (mm/dd/yy)	Place of Birth: _____
Citizenship:	_____	TIN: _____
No. of Family Members:	_____	Total Monthly income: <u>Php</u> _____
Credit Cards Owned: (specify)	_____	Numbers of Cars Owned: _____
Existing SBCorp Client: (Yes or No)	_____	If yes, client since: ____/____/____ (mm/yyyy)
Identification Document Information		
Identification Presented:	_____ Type _____ Number _____	
(Government Issued I.D.)		
Issue Date :	_____	Issued by: _____
Spouse Information		
Full Name:	_____	TIN: _____
Date of Birth:	____/____/____ (mm/dd/yyyy)	Citizenship: _____
Place of Birth:	_____	SSS/GSIS: _____
Contact Information		
Mobile No. :	_____	Telephone No.: _____
Email Address :	_____	Additional Contact No.: _____
Address Information		
Business Address:	_____ No. and St. Name / Subdivision _____ Barangay _____	
	_____ City/Municipality _____ Province _____ Region _____	
Ownership:	<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Postal Code: _____
If Renting, Name of Lessor:	_____	Occupied Since: (year) _____
Residential/Home Address:	_____ No. and St. Name / Subdivision _____ Barangay _____	
	_____ City/Municipality _____ Province _____ Region _____	
Ownership:	<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Postal Code: _____
If Renting, Name of Lessor:	_____	Occupied Since: (year) _____
Business Data		
Business Name:	_____	
Total Years in Business:	_____	Current Business Start Date: ____/____/____ (mm/yyyy)
Industry:	<input type="checkbox"/> Trading <input type="checkbox"/> Services <input type="checkbox"/> Agri-based <input type="checkbox"/> Manufacturing	
Nature of Business:	_____	
No. of Employees: (excl. family member)	_____	With Business Permit: <input type="checkbox"/> Yes <input type="checkbox"/> No
Business Contact Number:	_____ Mobile _____ Landline _____ Others _____	

Financial Information	
For Regular Businesses	For Small Transport Operators
1. Income Gross Monthly Income _____ <small>(Total income from all sources)</small>	1. Income <i>Daily Amount</i> Regular Trip _____
2. Business <i>Monthly Amount</i> Monthly Gross Sales/Revenue _____ Monthly Net Income _____ Business Assets Amount _____	2. Daily Expenses <i>Daily Amount</i> Boundary Fee _____ Loan Payments _____ Other Expenses _____
3. Expenses <i>Monthly Amount</i> Rent Expenses _____ Other Expenses _____	3. Monthly/Yearly Expenses Repair & Maintenance _____ Insurance _____ Taxes and Licenses _____ Other Expenses _____ Loan Payments _____ <small>(Loans from other creditors i.e. amortization of vehicle unit)</small>
4. Business Cash Outflow Loan Payments _____ <small>(Loans from other creditors)</small>	
List of Business Assets: _____ _____ _____	
<p>I hereby consent to the use and sharing of information which I gave in the course of my loan application and transaction with Small Business Corporation. These data, which include my personal or sensitive personal information, may be collected, processed, stored, updated, or disclosed by Small Business Corporation: (i) for legitimate purposes; (ii) to implement transactions which the loan applicant requested, allowed, or authorized; (iii) to offer and provide new or related products and services of Small Business Corporation or third parties; and, (iv) to comply with Small Business Corporation's internal policies and its reporting to governmental authorities under applicable laws.</p> <p>I further certify that any information given by me in connection with my loan application with Small Business Corporation is true and correct and that any material misrepresentation or falsity therein shall be construed as an act to defraud Small Business Corporation for which civil and/or criminal liability can be pursued against me. I also authorize Small Business Corporation to verify and investigate any information I have provided to Small Business Corporation from whatever sources Small Business Corporation may consider appropriate.</p> <p>I likewise acknowledge and confirm that Small Business Corporation, its credit delivery partners, and service providers could share any basic credit data including related updates/corrections to the Credit Information Corporation (CIC) and other entities authorized under the law in compliance with the Credit Information System Act of 2008 (R.A. 9510).</p>	
_____ Name and Signature	
_____ Date	
To be filled out by SB Corporation personnel:	
Loan Officer: _____	Signature _____
Date Received: _____	Area/Province: _____
Endorsing Partner (if any) : _____	