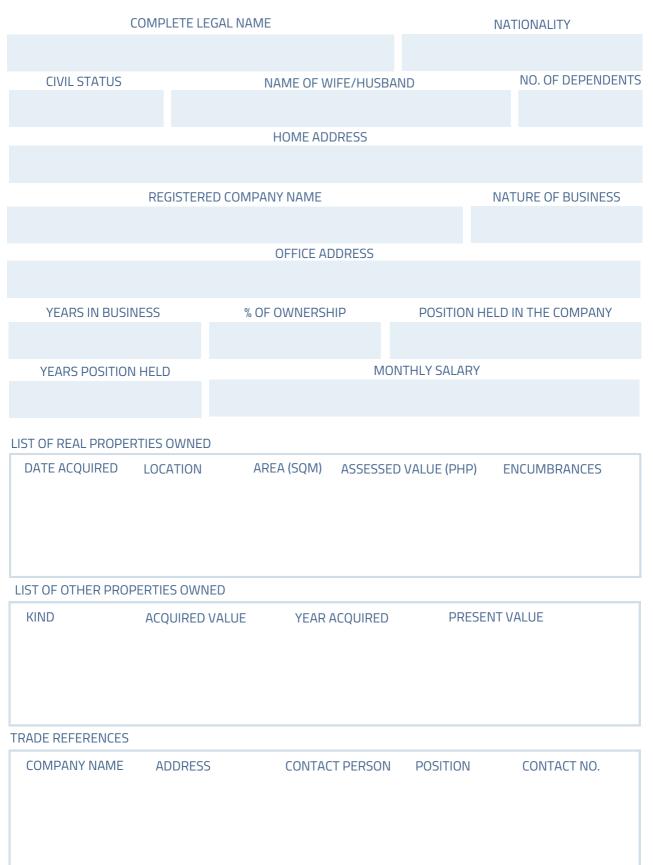
PACIFIC UNION INSURANCE COMPANY PRIVATE BOND

FORM NUMBER

BND-FORM-PRIV-01

Application Form (Individual)

Please fill out the form truthfully. Additional information or documents may be requested any time for review as part of the application process.



PACIFIC UNION INSURANCE COMPANY PRIVATE BOND

Application Form (Individual)

FORM NUMBER

BOND-PRIV-01

CREDITORS

NAME	YEAR CREDIT LINE AWARDED	LOAN AMOUNT RELEASED	PRESENT BALANCE
LIFE INSURANC	E		
COMPANY	AMOUNT	BENEFICIARY	

ADDITIONAL RELEVANT INFORMATION ABOUT THE APPLICANT CAN BE INDICATED HERE

APPLICATION

TYPE OF BOND	AMOUNT
BOND IN FAVOR OF	FOR THE PURPOSE OF

I HEREBY CERTIFY that the above information AND ALL OTHER SUBMITTED DOCUMENTS are TRUE, COMPLETE and CORRECT.

NAME SIGNATURE

SUBSCR	IBE	D AI	ND SWC	DRN to befor	e me i	n Makati	City,	Philippines	this	day of	, 20,	affiant
exhibiting	to	me	his/her	Community	Tax	Certificate	e No		, issued	at		, on
	, 20	,	and TIN									

 Doc No.
 Book No.

 Page No.
 Series of 20____

NOTARY PUBLIC Until December 31, 20___



PACIFIC UNION INSURANCE COMPANY PRIVATE BOND

Application Form (Individual)

FORM NUMBER

BND-FORM-PRIV-01

GENERAL REQUIREMENTS CHECK LIST			SPECIFIC REQUIREMENTS				
	ARTICLES OF INCORPORATION & BY LAWS			CERTIFICATE OF COMPLETION (FOR RETENTION OR WARRANTY)			
	COMPANY PROFILE			INVITATION TO BID (FOR BIDDER'S BOND)			
	COPY OF BUSINESS PERMIT/MAYOR'S PERMIT/ BARANGAY CLEARANCE		HEIRS BOND				
				EXTRA JUDICIAL SETTLEMENT			
	BIR CERTIFICATE OF REGISTRATION			COPY OF PUBLICATION AND AFFIDAVIT OFPUBLISHER			
	CERTIFICATE OF BUSINESS REGISTRATION (DTI)			DEATH CERTIFICATE			
	LIST OF KEY PERSONNEL			MARRIAGE/BIRTH CERTIFICATE (IF THE DECEASED IS SURVIVED BY A SPOUSE)			
	LATEST GIS, THREE YEARS OF AUDITED FINANCIAL STATEMENTS, LATEST INCOME TAX RETURN (ITR)			COPY OF THE TCT (SEC 4 RULE 74)			
				LOAN APPROVAL (REM)			
	CORPORATE AUTHORITY TO SIGN BONDS (SECRETARY'S CERTIFICATE / BOARD RESOLUTION)						
	COPY OF THE CONTRACT/PURCHASE ORDER/ NOTICE OF AWRD OR NOTICE TO PROCEED FOR THE BOND APPLIED (IDENTIFY WHERE UNDERTAKING OF THE BOND IS SPECIFICALLY STIPULATED)						
	AT LEAST 2 CO-SIGNORS WITH PROOF OF CAPACITY						

ADDITIONAL REQUIREMENTS IF APPLICANT IS A PARTNERSHIP:

PARTNERSHIP AGREEMENT

NAME OF PARTNERS AND ADDRESS

INCLUDING FINANCIAL STATEMENTS

IF APPLICANT IS A CONTRACTOR:

LIST OF COMPLETED & ON-GOING PROJECTS (NAME OF OWNER, CONTRACT PRICE, TYPE OF WORK, LOCATION AND DATE OF (TARGET) COMPLETION

LIST OF PREVIOUS AND PRESENT SUPPLIERS, LIST OF TOOLS, EQUIPMENTS AND MACHINERIES OWNED

RECEIVED BY (BRANCH/OFFICE):

RECEIVED BY (HEAD OFFICE):

DATE:

