

**PACIFIC UNION INSURANCE COMPANY  
PRIVATE BOND**

**Application Form (Individual)**

FORM NUMBER

BND-FORM-PRIV-01

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

COMPLETE LEGAL NAME

NATIONALITY

|  |  |
|--|--|
|  |  |
|--|--|

CIVIL STATUS

NAME OF WIFE/HUSBAND

NO. OF DEPENDENTS

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

HOME ADDRESS

|  |
|--|
|  |
|--|

REGISTERED COMPANY NAME

NATURE OF BUSINESS

|  |  |
|--|--|
|  |  |
|--|--|

OFFICE ADDRESS

|  |
|--|
|  |
|--|

YEARS IN BUSINESS

% OF OWNERSHIP

POSITION HELD IN THE COMPANY

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

YEARS POSITION HELD

MONTHLY SALARY

|  |  |
|--|--|
|  |  |
|--|--|

LIST OF REAL PROPERTIES OWNED

| DATE ACQUIRED | LOCATION | AREA (SQM) | ASSESSED VALUE (PHP) | ENCUMBRANCES |
|---------------|----------|------------|----------------------|--------------|
|               |          |            |                      |              |

LIST OF OTHER PROPERTIES OWNED

| KIND | ACQUIRED VALUE | YEAR ACQUIRED | PRESENT VALUE |
|------|----------------|---------------|---------------|
|      |                |               |               |

TRADE REFERENCES

| COMPANY NAME | ADDRESS | CONTACT PERSON | POSITION | CONTACT NO. |
|--------------|---------|----------------|----------|-------------|
|              |         |                |          |             |

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CREDITORS

| NAME | YEAR CREDIT LINE AWARDED | LOAN AMOUNT RELEASED | PRESENT BALANCE |
|------|--------------------------|----------------------|-----------------|
|      |                          |                      |                 |

LIFE INSURANCE

| 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 |
|                  |                    |

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DATA PRIVACY CONSENT

I acknowledge that **PACIFIC UNION INSURANCE COMPANY** may collect, use, process, and share my/our personal information to their shareholders, duly authorized representatives, business partners, adjusters, and other third parties for purposes such as but not limited to underwriting, claims, business analysis, compliance with regulatory requirements, and any other legitimate business purpose.

I also authorize **PACIFIC UNION INSURANCE COMPANY** to verify and investigate the information I have given, including the documents submitted. That **PACIFIC UNION INSURANCE COMPANY** may retain my/our personal information as long as my/ our business transaction with **PACIFIC UNION INSURANCE COMPANY** is still in full force and effect and in case of termination for a period of five (5) years from the date of termination. I/we acknowledge and agree to the data of privacy provisions stated above.

I hereby provide my/our consent by affixing my signature in this form.

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

NAME

SIGNATURE

**SUBSCRIBED AND SWORN** to before me in Makati City, Philippines this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, affiant exhibiting to me his/her Community Tax Certificate No. \_\_\_\_\_, issued at \_\_\_\_\_, on \_\_\_\_\_, 20\_\_\_, and TIN - \_\_\_\_\_.

Doc No. \_\_\_\_\_ Book No. \_\_\_\_\_  
Page No. \_\_\_\_\_ Series of 20 \_\_\_\_\_

NOTARY PUBLIC  
Until December 31, 20\_\_\_

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**GENERAL REQUIREMENTS CHECK LIST**

- ARTICLES OF INCORPORATION & BY LAWS
- COMPANY PROFILE
- COPY OF BUSINESS PERMIT/MAYOR'S PERMIT/  
BARANGAY CLEARANCE
- BIR CERTIFICATE OF  
REGISTRATION
- CERTIFICATE OF BUSINESS REGISTRATION (DTI)
- LIST OF KEY PERSONNEL
- LATEST GIS, THREE YEARS OF AUDITED FINANCIAL  
STATEMENTS, LATEST INCOME TAX RETURN (ITR)
- 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  
INCLUDING FINANCIAL STATEMENTS

**ADDITIONAL REQUIREMENTS IF APPLICANT IS A PARTNERSHIP:**

- PARTNERSHIP AGREEMENT
- NAME OF PARTNERS AND ADDRESS

**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

**SPECIFIC REQUIREMENTS**

- CERTIFICATE OF COMPLETION (**FOR  
RETENTION OR WARRANTY**)
- INVITATION TO BID (**FOR BIDDER'S  
BOND**)
- HEIRS BOND**
  - EXTRA JUDICIAL SETTLEMENT
  - COPY OF PUBLICATION AND  
AFFIDAVIT OF PUBLISHER
  - DEATH CERTIFICATE
  - MARRIAGE/BIRTH CERTIFICATE (IF THE  
DECEASED IS SURVIVED BY A SPOUSE)
  - COPY OF THE TCT (SEC 4 RULE 74)
  - LOAN APPROVAL (REM)

RECEIVED BY (BRANCH/OFFICE): \_\_\_\_\_

RECEIVED BY (HEAD OFFICE): \_\_\_\_\_

DATE: \_\_\_\_\_

DATE: \_\_\_\_\_