



# CREDIT CARD APPLICATION

## Member Get Member

### MY FINANCES

Type of Applicant	<input type="checkbox"/> CBC Depositor	<input type="checkbox"/> Non-CBC Depositor	Virtual Card Monthly Spending Limit (MSL): _____	
Preferred Card Variant	<input type="checkbox"/> Prime <input type="checkbox"/> Platinum <input type="checkbox"/> Cash Rewards <input type="checkbox"/> Freedom <input type="checkbox"/> World <input type="checkbox"/> Velvet Visa Signature	<b>Note:</b> This Virtual Card is for internet use only. Minimum MSL is PHP5,000.00. If no MSL indicated, default MSL is PHP20,000.00. The MSL is shared with the Principal Account's Credit Limit.		
	<input type="checkbox"/> Destinations Platinum <input type="checkbox"/> Destinations World (Peso) <input type="checkbox"/> Destinations World (Dollar)			

Actual card issued may vary depending on credit evaluation

Other Credit Card References (Please list down all active credit cards you own where you are the Principal Cardholder of at least 1 year)	Complete Card Number	Credit Limit	Member Since (mm/yy)
Issuing Bank			

### MY PERSONAL DATA

Name (First Name, Middle Name, Last Name, Suffix)	Name to Appear on Card (Maximum of 21 characters including spaces. Nicknames/Aliases not allowed)

Home Phone No. (include area code)	Mobile Phone No.	Personal E-mail Address	Alternate E-mail Address
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Gender	Date of Birth (mm/dd/yyyy)	Place of Birth (City, Country)	Nationality	Mother's Maiden Name (First Name, Middle Name, Last Name)	No. of Dependents
<input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Philippines <input type="checkbox"/>	<input type="checkbox"/> Filipino <input type="checkbox"/>		
Civil Status	Highest Educational Attainment	Home Ownership	Car Ownership	TIN	<input type="checkbox"/> SSS No. / <input type="checkbox"/> GSIS No.
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	<input type="checkbox"/> Post-Graduate <input type="checkbox"/> College <input type="checkbox"/> High School <input type="checkbox"/> Undergraduate	<input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged <input type="checkbox"/> Rented <input type="checkbox"/> Living with Parents	<input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged <input type="checkbox"/> Leased <input type="checkbox"/> None		

Home/Permanent Address (Unit No./Floor, Building Name, Building/House No., Street, Subdivision/Village, Barangay, City/Municipality, Province)	ZIP Code	Length of Stay (months/years)
Present Address (Unit No./Floor, Building Name, Building/House No., Street, Subdivision/Village, Barangay, City/Municipality, Province)	ZIP Code	Length of Stay (months/years)
<input type="checkbox"/> Same as Home/Permanent Address		

### MY WORK

Source(s) of Funds (Kindly select all applicable Source/s of Funds)	Employment Type	Employer/Company/Business Name	Occupation / Designation / Position / Title (Others, kindly specify in the blank)
<input type="checkbox"/> Business <input type="checkbox"/> Commission <input type="checkbox"/> Dividends <input type="checkbox"/> Funds from Family Member <input type="checkbox"/> Gifts and Donations <input type="checkbox"/> Government Assistance <input type="checkbox"/> Inheritance <input type="checkbox"/> Interest <input type="checkbox"/> Investments <input type="checkbox"/> Pension <input type="checkbox"/> Profession <input type="checkbox"/> Remittance <input type="checkbox"/> Rent <input type="checkbox"/> Salary <input type="checkbox"/> Sale of Property <input type="checkbox"/> Savings <input type="checkbox"/> Winnings / Rewards	<input type="checkbox"/> Employed <input type="checkbox"/> Retired <input type="checkbox"/> Not Applicable <input type="checkbox"/>		<input type="checkbox"/> Accountant <input type="checkbox"/> Custom Broker <input type="checkbox"/> Expatriate/Consular or Ambassadorial Staff <input type="checkbox"/> Jeweler <input type="checkbox"/> Lawyer <input type="checkbox"/> Money Changer <input type="checkbox"/> Student <input type="checkbox"/>
Work/Business Address (Unit No./Floor, Building Name, Building No., Street, Subdivision/Village, Barangay, City/Municipality, Province, ZIP Code)	Work/Business Phone No.	Office E-mail Address	

Years in Work / Business	Nature of Business / Employment (Others, kindly specify in the blank)	Gross Annual Income
	<input type="checkbox"/> Admin/Support <input type="checkbox"/> Agriculture/Fishing <input type="checkbox"/> Construction <input type="checkbox"/> Education <input type="checkbox"/> Financial/Insurance <input type="checkbox"/> IT/Communication <input type="checkbox"/> Manufacturing <input type="checkbox"/> Mining/Quarrying <input type="checkbox"/> Professional Service <input type="checkbox"/> Transportation/Storage <input type="checkbox"/> Wholesale/Retail <input type="checkbox"/>	

### OTHER DETAILS

Preferred Credit Card Delivery Address (Note: If blank, default will be the Present Address. The Bank may deliver to any alternate address on record to ensure successful delivery.)	Preferred Credit Card Statement of Account (SOA) Delivery Address (Note: If blank, default will be the Personal e-mail address. The Bank may deliver to any alternate address on record to ensure successful delivery.)
<input type="checkbox"/> Present Address <input type="checkbox"/> Office Address	<input type="checkbox"/> Personal E-mail Address <input type="checkbox"/> Office E-mail Address
Residency*	Type of ID Submitted
<input type="checkbox"/> Resident (Filipino / Alien / Special Resident Retiree's Visa) ACR I-Card No. (if applicable)	<input type="checkbox"/> Passport <input type="checkbox"/> PRC ID
<input type="checkbox"/> Non-Resident (Alien / Filipino Immigrant / OFWs with contract to work abroad for more than a year / Sea-based OFWs with immigrant or working visa)	<input type="checkbox"/> TIN/SSS/GSIS ID <input type="checkbox"/> Driver's License
*FCBS Non-Resident Indicator: Resident = <u>NO</u> ; Non-Resident = <u>YES</u>	<input type="checkbox"/> Voter's ID <input type="checkbox"/>

1. Do you have relatives working in China Bank?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name/Unit	Relationship
2. Are you / Are you related or associated to a person currently/formerly holding a position in any branch of the Philippine or foreign government or an international organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Relationship with the government personnel: (Position and Dept. of the Gov't Personnel)	<input type="checkbox"/> Occupying <input type="checkbox"/> Relative <input type="checkbox"/> Associate

### FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) INFORMATION

1. Are you a US Citizen/Green Card Holder or do you meet the Substantial Presence Test?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If YES, kindly accomplish FATCA Customer's Information for U.S. Persons Form.	
2. If No to Item No. 1. Do you have <u>any</u> of the following records in the US?	<input type="checkbox"/> YES <input type="checkbox"/> NO
<ul style="list-style-type: none"><li>Born in the U.S.</li><li>U.S. Residence</li><li>Standing Instruction to transfer funds to accounts maintained in the U.S.</li><li>Do you have a Power of Attorney or signatory authority granted to a person with a U.S. Address; or "in-care-of" or "hold mail" address?</li></ul>	<ul style="list-style-type: none"><li>Mailing Address (including a U.S. Post Office Box)</li><li>U.S. Telephone Number</li></ul>

If YES, kindly submit the following Requirements: U.S. IRS Form W-8BEN\* AND valid non-U.S. passport or any similar documentation establishing non-U.S. citizenship (e.g., Driver's License, Tax Certificate issued by the Government)

**Additional Requirement if Born in the U.S.:** Copy of Individual's Certificate of Loss of Nationality of the U.S. OR Written explanation of your renunciation of U.S. Citizenship or reason you did not obtain U.S. citizenship at birth

\* Kindly ask the Bank for a copy of U.S. IRS Form W-8BEN (Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting - Individuals)

### DECLARATION

By signing below, I confirm that the information provided in this application form is true and correct. I authorize China Banking Corporation (CBC) and its affiliates/authorized agents to verify and investigate the information contained herein or any document/paper submitted in connection herewith, as well as updates or corrections thereof, from whatever sources it may deem appropriate. I hereby consent and/or was authorized to give consent to the collection, retention, processing, disclosure (as provided under applicable confidentiality and data privacy laws of the Philippines including all subsequent amendments or supplements thereto) of any personal, sensitive personal and privileged information relating to me, the Partnership/Corporation/Judicial Entity and its officers, directors and stockholders, whether provided by me or coming to CBC's possession, and sharing of the said personal, sensitive personal and privileged information to CBC and its offices, branches, subsidiaries and affiliates (Chinabank Insurance Brokers, Inc., China Bank Securities Corporation, China Bank Capital Corporation, China Bank Savings, Inc., China Bank Properties and Computer Center, Inc., and Manulife-China Bank Life Assurance Corporation, among others), accredited third parties/vendors, or other persons or entities that CBC may reasonably select, personal information processors, credit reporting or credit reference agencies, credit protection provider, guarantee institutions, debt collection agencies, government agencies and private regulatory organizations and other financial institutions, and other outsourced service providers engaged by CBC as allowed by law and internal Bank policies, for purposes reasonably required by CBC such as, but not limited to, its conduct of everyday business (processing my Credit Card application and transactions, maintenance of my account/s), performance of daily technological and operational functions, communications technology services including updates and automation of the systems of CBC group and its affiliates, compliance with the law and regulatory organizations, research and statistics including conduct of surveys, marketing and cross-selling of products and services of CBC, its subsidiaries and affiliates, client relationship management, sales lead generation, running credit and negative information checks, conduct of skiptracing, asset and property search and/or verification, statistical and risk analysis, data analytics, client profiling, and in the event of default arising from non-payment of my Credit Card obligations with CBC, and all other purposes as allowed in the banking industry practice, businesses of CBC's subsidiaries and affiliates, and by law. I shall notify CBC in writing, which must be acknowledged by CBC, if I do not consent to the processing and disclosure of said information with CBC's representative offices, subsidiaries, affiliates, agents and accredited third parties/vendors or other persons or entities that CBC may reasonably select. I further acknowledge my right to information, access, correction, rectification, erasure of my personal, sensitive personal and privileged information, data portability, objection to processing, file complaint and damages under the Data Privacy Act.

I agree that CBC may retain my personal and account information for as long as necessary for the fulfillment of the purpose for which it was collected and such other purposes that I may have consented to from time to time, as required by pertinent laws and regulations, and provide information when required to do so in accordance with RA 1405, RA 6426, RA 6791, RA 9510, RA 9160, RA 10173, as amended, and other similar and applicable laws, by court order, and jurisprudence. I agree that CBC shall not be liable for any loss or damage arising from CBC's disclosure of personal and account information for the above.

I consent and authorize the Land Registration Authority, Register of Deeds, Land Transportation Offices, local government unit offices, and other government agencies and instrumentalities to give, provide, share, and disclose any and all information and documents as may be necessary and required by the Bank and its authorized representatives, in connection with its conduct of skiptracing, asset and property search and/or verification.

In the FATCA Information section, if I answered "NO" to all items, I hereby certify that I am not a U.S. Person and WITHOUT U.S. Indicia. If I answered "NO" to item 1 and "YES" to item 2, I hereby certify that I am not a U.S. Person but WITH U.S. Indicia. I undertake to submit the required documents to support my Non-US Person status (with or without US Indicia). In the event that CBC discovers that I am a U.S. Person, I hereby waive my rights of confidentiality under applicable laws and CBC and its authorized representative(s) are hereby absolutely and unconditionally authorized to report and disclose to the U.S. IRS or Philippine Regulatory Agencies (e.g. Bureau of Internal Revenue, Bangko Sentral ng Pilipinas, and the like) and/or any third party authorized to receive FATCA information, any and all information regarding my account that shall be required. In the event of any change in my circumstance which may affect my status, I undertake and warrant that I will inform CBC in writing of such change within thirty (30) calendar days from occurrence of such change.

### FOR MEMBER GET MEMBER – REFERRER DETAILS

"By providing the name of the Cardholder named below as my Referrer, I hereby declare that I have obtained the consent of the aforementioned Referrer to provide his/her name in my credit card application. I confirm that the Referrer is aware of and has agreed to be listed as my Referrer for this application."

Referrer (First Name, Middle Name, Last Name, Suffix)	Referral Code
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### FOR BANK'S USE ONLY

"We certify that the above information, the attached documents and their contents are true and correct, according to the Bank's records and according to depositor's own declarations."

Branch Officer	Branch Head/OIC/Area Head					
Signature Over Printed Name / Date	Signature Over Printed Name / Date					
Industry Sub-Class	Program Code	Main Sales Channel Code	Branch Code	Area Code	Region Code	Referrer's Name
Employee Number						