



PNB CORE CREDIT CARDS APPLICATION FORM

Accomplish this form and fax to (02) 892-7427 or (02) 812-6247. You may also submit this form to any PNB branch.

PERSONAL INFORMATION

Form fields for Personal Information including First Name, Middle Name, Last Name, Mother's Full Maiden Name, No. of dependents, Citizenship, Status, Date of Birth, Sex, SSS / GSIS, TIN, Home Address, Home Landline Number, Mobile Number, Email, City / Province, ZIP Code, Years of Stay, Current Relationship with PNB, and PNB Account Number.

YOUR NON-PNB CREDIT CARDS (at least one year principal ownership)

Table with 3 columns: Credit Card Company, Card Number, Credit Limit

MABUHAY MILES MEMBERSHIP

Provide your Mabuhay Miles membership number in order to enjoy conversion of rewards points earned to Mabuhay Miles. A new Mabuhay Miles membership number will be auto-generated if the Mabuhay Miles membership number portion below is left blank or an invalid number is provided. No adjustment can be made afterwards.

Are you a current member of Mabuhay Miles Club? Yes No If you are, please indicate your existing Mabuhay Miles membership

WORK AND FINANCES

Form fields for Work and Finances including Business / Company Name, Business / Company Phone Numbers, Business / Company Address, City / Province, ZIP Code, Employment Status, Position / Occupation, Rank, Year/s with the Company, Annual Income, and Source of Income.

SPOUSE INFORMATION

Form fields for Spouse Information including First Name, Middle Name, Last Name, Date of Birth, Citizenship, Employment Status, Business / Company Address, Office Tel. No., Tenure with Present Employer or Business, and Mobile Number.

BILLING INFORMATION

Form fields for Billing Information including Billing Address, Mode of Payment, and Auto Debit my PNB Dollar acct. #.

SUPPLEMENTARY CARD (must be at least 13 years old) - FREE FOR LIFE

Form fields for Supplementary Card including First Name, Middle Name, Last Name, Date of Birth, Sex, Mother's Full Maiden Name, Relationship with principal applicant, Email Address, and Mobile Number.

FRAUD TRANSACTION INSURANCE

I would like to enroll my card/s to Fraud Transaction Insurance Monthly Billing (P10/month) Annual Billing (P120/year)

DECLARATION

By signing below, I/we are applying for a PNB Credit Card. I/we agree to abide by and be governed by the Terms and Conditions governing the issuance and use of the PNB Credit Card and all future amendments thereto.

I/we hereby agree to waive my/our right/s regarding the confidentiality of deposits under R.A. 1405, as amended, as the disclosure is necessary and relevant in the evaluation of my/our application for a PNB Credit Card and to ensure a successful debit under an auto-debit payment arrangement with my/our PNB account should I/we decide to avail of the auto-debit payment facility to my/our PNB Credit Card.

I/we hold ourselves, jointly and severally liable for all obligations and liabilities arising from the use of the PNB Credit Card and supplementary cards and, in the the event that my/our application for a PNB Credit Card is disapproved, the Philippine National Bank is under no obligation to provide me/us with the reason for such a decision.

The accomplished application form and requirement/s submitted will become the property of the Philippine National Bank. The Philippine National Bank is under no obligation to return the said documents.

Visit www.pnbcards.com.ph for the complete Terms and Conditions.

Signature of Principal Applicant

Date

FOR BANK USE ONLY Source Tag Program Name/Code: Employee Branch/Channel Employee/ Solicitor's Printed