



APPLICATION FORM

Please attach Applicant's 2x2 ID here

APPLICANT'S INFORMATION

FULL NAME:						
PERMANENT ADDRESS:						
CURRENT ADDRESS:					AGE:	
PLACE OF BIRTH:					SEX:	
DATE OF BIRTH:			OWNERSHIP:		STATUS:	
LENGTH OF STAY:	YEAR(s):	MONTH(s):	<input type="checkbox"/> Owned	<input type="checkbox"/> Stay-in Living w/ parents or relatives	NATIONALITY:	
MOTHER'S MAIDEN NAME:					RELIGION:	
FATHER'S NAME:					SSS #:	
OCCUPATION:					TIN #:	
NAME OF SPOUSE:					CONTACT NUMBER:	
OCCUPATION:					EMAIL ADDRESS:	

SOURCE OF INCOME

COMPANY/BUSINESS NAME:									
ADDRESS:									
NATURE OF BUSINESS:					<input type="checkbox"/>	EMPLOYED	<input type="checkbox"/>	REGULAR	
POSITION TITLE:					<input type="checkbox"/>	SELF - EMPLOYED	<input type="checkbox"/>	PROBATIONARY	
LENGTH OF STAY:	YEAR (s):	MONTH (s):	TELEPHONE #:			<input type="checkbox"/>	BUSINESS	<input type="checkbox"/>	CONTRACTUAL
GROSS INCOME:					<input type="checkbox"/>	OTHERS (please specify):			

BAHAY MAKABAYAN PREFERRED MODEL

<input type="checkbox"/>	AGONCILLO MODEL	<input type="checkbox"/>	SILANG MODEL	<input type="checkbox"/>	DAGOHOY/MABINI MODEL
<input type="checkbox"/>	RIZAL MODEL	<input type="checkbox"/>	DIGONG MODEL	<input type="checkbox"/>	CONTAINER VAN
<input type="checkbox"/>	DEL PILAR MODEL	<input type="checkbox"/>	BONIFACIO MODEL	<input type="checkbox"/>	SOCIALIZED HOUSE TYPE

PURCHASING DETAILS

PAINT:	TYPE OF HOUSE:	<input type="checkbox"/>	DO IT YOURSELF (DIY)
WINDOWS:		<input type="checkbox"/>	CONTAINER VAN (please specify its type):
TILES:		<input type="checkbox"/>	CUSTOMIZED MODEL (please specify its floor area/s):
ROOF:	MODE OF PAYMENT:	<input type="checkbox"/>	CASH ON DELIVERY (COD)
COMPLETE ADDRESS OF LOCATION/SITE FOR CONSTRUCTION:		<input type="checkbox"/>	BANK FINANCING
		<input type="checkbox"/>	CASH TO CASH

UNDERTAKING

I hereby certify that the above information given are true and correct as to the best of my knowledge.

FULL NAME AND SIGNATURE OF PRINCIPAL APPLICANT

APPROVAL (to be filled up by Bahay Makabayan approving officer)

Applicant Referred and interviewed by:

FULL NAME AND SIGNATURE OF APPROVING OFFICER

DATE