



(Branch)

RESERVATION FORM

Date of Reservation: _____

A. Buyer Information

Name : _____
Address : _____
Contract Number : _____
Employer/Business Name : _____

B. Property Information

Property Number : _____
Property Location : _____
Selling Price : _____
Mode of Payment : _____

Signature

TO BE FILLED OUT BY Pag-IBIG FUND

Received by: _____

Date: _____
Time: _____

Authorized Signatory
(Signature Over Printed Name)

(July 2012)



(Branch)

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(July 2012)



(Branch)

OFFER TO PURCHASE

Date

Attention: **ACQUIRED ASSET MANAGEMENT/SECTION**

Sir/Madam:

Relative to the sale of Pag-IBIG Fund property/ies described below, I/We hereby submit my/our offer to purchase the said property subject to the terms and conditions of the Guidelines Implementing the Pag-IBIG Fund Acquired Assets Disposal Program:

1. Location of the Property: _____
2. Property No. _____ TCT/CCT No. _____
3. Selling Price: _____ (P _____)
4. Mode of Payment: Cash Installment (___ months) Pag-IBIG Housing Loan
5. Former Owner: Yes No
6. Pag-IBIG Member: Yes No

I/We agree to hold Pag-IBIG Fund free and harmless from liabilities of whatever kind and nature arising out of any legal claims which may be filed by third persons involving the property. Further, I/we also agree that Pag-IBIG Fund has no commitment and makes no guaranty to approve the offer, as it is understood to be subject to final approval by Pag-IBIG Fund's approving authorities.

Very truly yours,

OFFEROR/AUTHORIZED REPRESENTATIVE

Buyer Information:

NAME OF BUYER/AUTHORIZED REPRESENTATIVE					DATE OF BIRTH	
<i>Last Name</i>	<i>First Name</i>	<i>Name Extension (e.g. Jr., III)</i>	<i>Middle Name</i>	<i>Maiden Name</i>		
					m	m
					d	d
					v	v
					v	v
SSS/GSIS ID NO.			TAXPAYERS IDENTIFICATION NO. (TIN)		Pag-IBIG MID NO.	
					COMMON REFERENCE NO. (CRN)	
PERMANENT HOME ADDRESS					CONTACT DETAILS	
<i>Unit/Room No., Floor</i>	<i>Building Name</i>	<i>Lot No., Block No., Phase No. or House No.</i>		<i>Street Name</i>		
					<i>(Indicate country code if abroad)</i>	
					COUNTRY + AREA CODE TELEPHONE NO.	
<i>Subdivision</i>					Home Tel. No.	
<i>Barangay</i>						
<i>Municipality/City</i>						
<i>Province and State Country (if abroad)</i>						
<i>ZIP Code</i>						
PRESENT HOME ADDRESS					Cellphone No.	
<i>Unit/Room No., Floor</i>	<i>Building Name</i>	<i>Lot No., Block No., Phase No. or House No.</i>		<i>Street Name</i>		
<i>Subdivision</i>					Employer/Business Tel. No.	
<i>Barangay</i>						
<i>Municipality/City</i>						
<i>Province and State Country (if abroad)</i>						
<i>ZIP Code</i>						
EMPLOYER/BUSINESS NAME					Email Address	
EMPLOYER/BUSINESS ADDRESS					PREFERRED MAILING ADDRESS	
<i>Unit/Room No., Floor</i>	<i>Building Name</i>	<i>Lot No., Block No., Phase No. or House No.</i>		<i>Street Name</i>		
					<input type="checkbox"/> Present Home Address	
<i>Subdivision</i>					<input type="checkbox"/> Employer/Business Address	
<i>Barangay</i>					<input type="checkbox"/> Permanent Home Address	
<i>Municipality/City</i>						
<i>Province and State Country (if abroad)</i>						
<i>ZIP Code</i>						

THIS PORTION IS FOR Pag-IBIG FUND USE ONLY

ACQUIRED ASSET MANAGEMENT/SECTION						
Computation of Net Purchase Price				For sale through installment		
Offered Price: P _____				Interest Rate _____ %		
Less: Discount (____%): (_____)				Term _____ months		
Net Purchase Price P _____				Monthly Installment		
				P _____		
Computed by	Date	Approved by	Date	Disapproved by	Date	Remarks

**AUTHORIZATION TO CONDUCT CREDIT/
BACKGROUND INVESTIGATION**

Date

Dear Sir/Madam:

I hereby authorize Pag-IBIG Fund or its duly authorized representative to validate/check with the following institutions in connection with my/our application for housing loan:

- Company/Employer
- BIR
- Bank (*in case income is sourced from foreign remittances, pension, etc*)
- Credit Cards Owned (*if any*)
- DTI (*Business Name*)
- LGU (*Mayor's Permit/Business Permit*)
- LTFRB (*Transport Franchise*)
- Others: _____

Thank you.

Very truly yours,

Signature of Borrower
Over Printed Name

Republic of the Philippines
City of Mandaluyong

AFFIDAVIT OF UNDERTAKING

I, _____ of legal age, Filipino, Single/Married, with residence address at _____

After having duly sworn in accordance with law, deposes and states:

1. That I am Pag-IBIG member who wishes to purchase a residential house and lot under the "Pag-IBIG Fund Acquired Assets Disposal Program " (Circular 308) which property is described and identified as Blk __ Lot __ Ph _____ ;
2. That I am buying and accepting the subject property on "AS IS WHERE IS" basis knowing for a fact that the same is presently occupied by the original borrower/buyer's of rights/illegal occupants;
3. That any payment or deposit made with the Pag-IBIG Fund in connection with my purchase of the said property, the same shall be forfeited in accordance with the Purchase Offer Form;
4. That I fully understand the contents of the foregoing affidavit and had been explained to me in dialect/language known to me;
5. That I am executing this affidavit to attest the truth and veracity of that foregoing and for whatever purpose this may serve.

IN WITNESS THEREOF, I affixed my signature this ____ day of _____, 2014
_____.

Signature over Printed Name



HOME DEVELOPMENT MUTUAL FUND
Acquired Assets Management
7/F JELP Business Solutions Center
409 Shaw Boulevard, Mandaluyong City

I, _____ hereby acknowledge that I have been duly informed by the Fund that the **RESERVATION FEE** for **Property No.**_____ is **NON - TRANSFERRABLE / NON - REFUNDABLE** and that it is **valid for THIRTY (30) days** from the date the reservation is made and in the event of **non-compliance with the requirements**, my reservation is deemed **CANCELLED** without the need to be notified.

Date

Signature over Printed Name



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Acquired Assets Management
7/F JELP Business Solutions Center
409 Shaw Boulevard, Mandaluyong City

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Date

Signature over Printed Name



MEMBERSHIP STATUS VERIFICATION SLIP

Date Filed: _____ MSVS No. _____

Form for Membership Status Verification Slip (Left side), including fields for personal information, employment history, housing verification, and MSVS approval.



MEMBERSHIP STATUS VERIFICATION SLIP

Date Filed: _____ MSVS No. _____

Form for Membership Status Verification Slip (Right side), including fields for personal information, employment history, housing verification, and MSVS approval.