

CIF Number
(for internal use)

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I. CUSTOMER INFORMATION

Business Name

Trade Name (SEC/DTI Approved)

Are you an existing BDO Customer? Yes No
(If 'Yes', select the 'BDO Product Type/s' that you have.)

BDO Product Type Deposits Cards Loans Wealth Management Insurance
Existing BDO customers only need to fill in the fields or inputs with Check Marks if there is information to update. Otherwise, place NA or select the appropriate input.

II. CONTACT INFORMATION

✓ Business Email Address

✓ Business Landline Number

Country Code Area Code Landline Number Local (if applicable)

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✓ Business Address

Unit No. Building / No. Block. Street

Subdivision / Village / Barangay

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City / Municipality

Province / State

Country

Zip Code

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✓ Business Mailing Address (If different from 'Business Address'. Otherwise, tick 'Same as Business Address')

Same as Business Address

Unit No. Building / No. Block. Street

Subdivision / Village / Barangay

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City / Municipality

Province / State

Country

Zip Code

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III. BUSINESS INFORMATION (Refer to 'Instructions' for 'List of Codes' for 'Nature of Work / Business')

Business Registration

- Domestic
- Foreign

Business Type

- Single Proprietorship
- Partnership
- Joint Venture
- Corporation
- Treasurer-In-Trust For
- Association / Coop & Organization
- Government Owned & Controlled Corporation
- Embassies / Diplomatic Missions / Attached Offices

✓ Nature of Business

Provide all applicable 'Codes.' (ex. ABC, DEF, GHI)

TIN

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Registration Number

Date of Incorporation
(mm/dd/yyyy)

		/			/						
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Place of Incorporation

City / Municipality

Province / State

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Paid Up Capital

In Philippine Pesos (PhP)

✓ Gross Monthly Sales

In Philippine Pesos (PhP)

Do you have deposits in other banks? If 'Yes', provide information below

Name of bank (ex. Bank A)

Type of account (ex. Savings, Checking)

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Name of bank (ex. Bank A)

Type of account (ex. Savings, Checking)

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IV. REGULATORY REQUIREMENTS

- Online Gaming Questionnaire** (Refer to 'Instructions' for details on 'Online Gaming Business')
 Does the business provide service, process transactions, have transactions or related interests / relationships with any business or service provider in the online gaming industry? Yes No
- Onboarding requirements for ALL Beneficial Owners, Primary Officers, and Authorized Signatories of the Business Entity.**
 - Any Individual Beneficial Owner with at least 20% ownership in the business, Primary Officers and Authorized Signatories must fill out 'Form A1-A2'.
 - Any Individual Beneficial Owner with more than 10% ownership in the business and is obligated to pay taxes to the U.S. IRS because of their citizenship, residency, or other reasons such as meeting the 'Substantial Presence Test' must also fill out 'Business A7 Form - Foreign Account Tax Compliance Act (FATCA) Due Diligence Form'. (Refer to 'Instructions' for details on the 'Substantial Presence Test')

V. CUSTOMER UNDERTAKING (Business Accounts with more than six signatories may use an additional 'Business A2' as necessary.)

By signing, I/We hereby certify, for and on behalf of the Customer, that the information given in this application is true and correct to the best of my/our knowledge and confirm that I/we have read, understood, and agreed in full to the Terms and Conditions of the General and Special Provisions on Deposits, the BDO ATM Debit Card Terms and Conditions, and the Terms and Conditions of BDO Biometrics (the "BDO Terms and Conditions") and have fully understood and agreed that the Customer will be governed by the provisions thereof, as well as the rules and regulations of BDO, Bangko Sentral ng Pilipinas, Anti-Money Laundering Council, Bankers Association of the Philippines, and the Bureau of Internal Revenue with respect to taxes imposed on interest on deposits and bank commission/charges relative to the establishment of operations of the account/s opened. The Customer renders the bank free and harmless from any claim and/or liability arising from or incidental to the performance of the transactions entered by the contact person/authorized representative named above.

I/We also hereby affirm, that the features, requirements, risks and benefits of the BDO product(s) and services the Customer is availing were fully disclosed and explained clearly to me/us by BDO. I/We further declare that I/we have fully understood and agree that the Customer will be governed by the rules and regulations of the BDO product(s) and services the Customer is availing. I/We also acknowledge that the BDO Terms and Conditions were made available to me/us upon account opening, and where copies were given upon request and posted in BDO's website at bdo.com.ph/info/accounts. BDO may make amendments to the BDO Terms and Conditions by giving me/us notice by (i) exhibiting the same at any of BDO's branches, (ii) publishing the same at BDO's website or any media, or (iii) such other manner BDO deems fit.

If the Customer provides BDO with personal information and sensitive personal information of any individual as required by, pursuant to, or in connection with this application, the Customer represents and warrants that it has (i) notified the relevant individual of the purposes for which the personal information and sensitive personal information will be collected, processed, used, stored, updated, or disclosed, and (ii) obtained such individual's consent for, and hereby consents on behalf of such individual to, the collection, processing, use, storage, updating and disclosure of his personal information and sensitive personal information by BDO, in each case, in accordance with or for the purposes stated in this application and related documents, and confirms that it has been authorized by such individual to provide such consent on his behalf.

Signature over Printed Name and Title/Position

Date Signed
(mm / dd / yyyy)

Signature over Printed Name and Title/Position

Date Signed
(mm / dd / yyyy)

Signature over Printed Name and Title/Position

Date Signed
(mm / dd / yyyy)

Signature over Printed Name and Title/Position

Date Signed
(mm / dd / yyyy)

Signature over Printed Name and Title/Position

Date Signed
(mm / dd / yyyy)

Signature over Printed Name and Title/Position

Date Signed
(mm / dd / yyyy)

For concerns, contact us thru our 24x7 hotline (+632) 8631-8000 or email us via callcenter@bdo.com.ph
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REVISED AS OF JULY 2022

Account Number

Date Opened (mm/dd/yyyy)

Residency

- Resident
- Non-resident

RC

- N
- H

NLDS

-

Walk In Referred By (please indicate below)

Verified By
Name and Signature

Approved By
Name and Signature

Business Visit / Remarks

CIF Number
(for internal use)

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I. BORROWER / COUNTERPARTY INFORMATION

Business Name

Trade Name (SEC/DTI Approved)

II. STOCKHOLDERS, PRIMARY OFFICERS, AND AUTHORIZED SIGNATORIES

Full Name

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth
(mm/dd/yyyy)
 / /

Position in Company (If owner, indicate % ownership)

 Signatory Owner

 Officer

Full Name

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth
(mm/dd/yyyy)
 / /

Position in Company (If owner, indicate % ownership)

 Signatory Owner

 Officer

Full Name

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth
(mm/dd/yyyy)
 / /

Position in Company (If owner, indicate % ownership)

 Signatory Owner

 Officer

Full Name

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth
(mm/dd/yyyy)
 / /

Position in Company (If owner, indicate % ownership)

 Signatory Owner

 Officer

Full Name

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth
(mm/dd/yyyy)
 / /

Position in Company (If owner, indicate % ownership)

 Signatory Owner

 Officer
III. CUSTOMER UNDERTAKING

By signing, I hereby certify that the information in this form is true and correct to the best of my knowledge. I undertake to advise BDO Group and provide documentation for any changes to the above information.

Signature over Printed Name

Date Signed
(mm/dd/yyyy)
 / /

CIF Number
(for internal use)

I. CUSTOMER INFORMATION

Business Name

Trade Name (SEC/DTI Approved)

Are you an existing BDO Customer? Yes No | BDO Product Type Deposits Cards Loans Wealth Management Insurance
(If 'Yes', select the 'BDO Product Type/s' that you have.)

II. FINANCIAL INFORMATION

Number of Employees

Monthly Travel and Entertainment Expenditure

Gross Monthly Income

Gross Monthly Expenses

Net Taxable Income

Does your business have Corporate Credit Card accounts with other banks?
If 'Yes', provide information below

Name of bank (ex. Bank A)	Corporate Card brand	The credit limit in PHP
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Does your business have Loans with other banks?
If 'Yes', provide information below

Name of bank (ex. Bank A)	Type of Loan (ex. Business Loan)	The monthly loan amortization in PHP
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

III. BUSINESS REFERENCES

Major Customers
Contact Person

(ex. Juan Santos)

Company Name

(ex. ABC Company)

Contact Number

Provide the most accessible number where your reference can be reached

Major Suppliers

Contact Person

(ex. Juan Santos)

Company Name

(ex. ABC Company)

Contact Number

Provide the most accessible number where your reference can be reached

IV. PRODUCT INFORMATION BDO Corporate Card shall refer to a BDO Corporate Credit Card (Mastercard/Visa/Diners Club) or an American Express Corporate Card.

BDO Corporate Card Details

- Mastercard American Express
 Visa Diners Club

Billing Currency

- Peso
 Dollar

Cash Advance

- Yes
 No

Desired Credit Limit

Primary Use of Corporate Card

Number of Cards to be Issued

Company Name (To be embossed on the Credit Card)

V. AUTHORIZED REPRESENTATIVE/S

Primary Representative

Full Name

Last Name	First Name		Middle Name		Suffix	Position / Title	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Mobile Number

Country Code	Mobile Number
<input type="text"/>	<input type="text"/>

Work / Business Email Address

Work / Business Landline Number

Country Code	Area Code	Landline Number	Local (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Secondary Representative

Full Name

Last Name	First Name		Middle Name		Suffix	Position / Title	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Mobile Number

Country Code	Mobile Number
<input type="text"/>	<input type="text"/>

Work / Business Email Address

Work / Business Landline Number

Country Code	Area Code	Landline Number	Local (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

VI. CUSTOMER UNDERTAKING

I/We hereby agree that the terms of the Business A1-A2 Form and its attachments form part of this Business B1-B2 Form and are deemed an integral part hereof, my/our Conformance in the Business A1-A2 Form is deemed restated for purposes of my/our application in this Business B1-B2 Form and that the representations, warranties, and undertakings under this Business B1-B2 Form shall be in addition to those provided in the Business A1-A2 Form.

I/We hereby certify that all information and documents given in this Business B1-B2 Form and in the Business A1-A2 Form are true and correct. I/We authorize the relevant Consumer Banking Unit/s to update or cause the updating of the information in the Business A1-A2 Form based on the information or documents provided by me/us. I/We understand that non-disclosure and/or falsification of information and documents herein required shall be grounds for the disapproval of my/our application, a default of my/our loan, and/or legal action against me/us.

By signing below, the above named Company through the undersigned certifies that the foregoing information is true and correct and that the Company agrees to be bound by the Terms and Conditions Governing the Issuance and Use of the BDO Corporate Cards and all future amendments thereto. The Company further holds itself jointly and severally liable with the individual applicant named in the accompanying application form for all obligations and liabilities incurred with the use of the BDO Corporate Card. In the event this application for the BDO Corporate Card is disapproved, BDO is not obliged to provide the reason thereof. I/we further irrevocably authorize you to disclose to any entity any/all information as may be stated herein or obtained by you in relation to the transactions covered by this application as may be required by relevant laws or regulations. The above named Company through the undersigned hereby authorizes the transfer, disclosure and communication of any information relating to the Company's accounts with BDO to any of the offices, branches, subsidiaries, affiliates, agents and representatives of BDO and third parties selected by any of them for data processing/storage, customer satisfaction surveys, product, and service offers made to me through mail/e-mail/fax/SMS or telephone, and for any other purpose as BDO may deem appropriate, and as may be required by law or regulation. The Company further authorizes the regular submission and disclosure to any and all credit information service providers such as, but not limited to, Credit Card Association of the Philippines, Credit Information Corporation, of any information, whether positive or negative relating to my basic credit data (as defined under R.A. No. 9510) with BDO as well as any updates or corrections thereof. The foregoing constitutes the Company's written consent for any such submission and disclosure of information relating to the Company's accounts for the purpose indicated above and under applicable laws, rules and regulations. The Company agrees to hold BDO free and harmless from any liabilities that may arise from any transfer, disclosure or storage of information relating to the accounts.

NOTE: Terms and Conditions Governing the Issuance and Use of BDO Corporate Cards refers to the Terms and Conditions Governing the Issuance and Use of Corporate and Commercial Credit Cards (for Mastercard/Visa/Diners Club), or the American Express Corporate Card Account and Corporate Cardmember Terms and Conditions.

Signature over Printed Name and Title/Position

Date Signed
(mm/dd/yyyy)

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Signature over Printed Name and Title/Position

Date Signed
(mm/dd/yyyy)

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Signature over Printed Name and Title/Position

Date Signed
(mm/dd/yyyy)

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Signature over Printed Name and Title/Position

Date Signed
(mm/dd/yyyy)

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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REVISED AS OF NOVEMBER 2022

Account Liability Sole Liability Joint and Several Limited Individual

SC	IC	Branch Code	Branch Name	Referrer Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

CIF Number
(for internal use)

- Account Owner**
- Business Owner / Officer / Signatory**

I. CUSTOMER INFORMATION

Full Name

<small>Last Name</small>	<small>First Name</small>	<small>Middle Name</small>	<small>Suffix</small>	Date of Birth <small>(mm/dd/yyyy)</small>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

Are you an existing BDO Customer? **Yes** **No** | **BDO Product Type** **Deposits** **Cards** **Loans** **Wealth Management** **Insurance**
(If 'Yes', select the 'BDO Product Type/s' that you have.) Existing BDO customers only need to fill in the fields or inputs with check marks if there is information to update. Otherwise, place NA or select the appropriate input.

II. CONTACT INFORMATION

<input checked="" type="checkbox"/> Personal Mobile Number <small>Country Code</small> <input type="text"/> <small>Mobile Number</small> <input type="text"/>	<input checked="" type="checkbox"/> Personal Email Address <input type="text"/>	<input checked="" type="checkbox"/> Home Landline Number <small>Country Code</small> <input type="text"/> <small>Area Code</small> <input type="text"/> <small>Landline Number</small> <input type="text"/>
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Home Address
Unit No. / Building / Block No. / Street Subdivision / Village / Barangay

<small>City / Municipality</small> <input type="text"/>	<small>Province / State</small> <input type="text"/>	<small>Country</small> <input type="text"/>	<small>Zip Code</small> <input type="text"/>
---------------------------------------------------------	------------------------------------------------------	---------------------------------------------	----------------------------------------------

Alternate Address (Do you have another home address, including abroad? If 'Yes', provide below. If 'No', tick 'Same as Home Address') **Same as Home Address**
Unit No. / Building / Block No. / Street Subdivision / Village / Barangay

<small>City / Municipality</small> <input type="text"/>	<small>Province / State</small> <input type="text"/>	<small>Country</small> <input type="text"/>	<small>Zip Code</small> <input type="text"/>
---------------------------------------------------------	------------------------------------------------------	---------------------------------------------	----------------------------------------------

<input checked="" type="checkbox"/> Work / Business Email Address <input type="text"/>	<input checked="" type="checkbox"/> Work / Business Landline Number <small>Country Code</small> <input type="text"/> <small>Area Code</small> <input type="text"/> <small>Landline Number</small> <input type="text"/> <small>Local (if applicable)</small> <input type="text"/>
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Work / Business Address
Unit No. / Building / Block No. / Street Subdivision / Village / Barangay

<small>City / Municipality</small> <input type="text"/>	<small>Province / State</small> <input type="text"/>	<small>Country</small> <input type="text"/>	<small>Zip Code</small> <input type="text"/>
---------------------------------------------------------	------------------------------------------------------	---------------------------------------------	----------------------------------------------

III. PERSONAL INFORMATION

Country of Birth

Gender <input type="radio"/> Male <input type="radio"/> Female	<input checked="" type="checkbox"/> Civil Status <input type="radio"/> Single <input type="radio"/> Legally Separated <input type="radio"/> Annulled <input type="radio"/> Married <input type="radio"/> Divorced <input type="radio"/> Widow/er
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Citizenship (If 'Others', provide below)
 Filipino
 Others

TIN
Provide your Tax Identification Number

IV. FINANCIAL INFORMATION (Refer to 'Instructions' for 'List of Codes' for 'Source of Funds' and 'Nature of Work / Business')

<input checked="" type="checkbox"/> Sources of Funds <small>Provide all applicable 'Codes'. (ex. 001, 002, 003)</small> <input type="text"/>	<input checked="" type="checkbox"/> If 'Source of Funds' is 'Remittance' or '004', provide the following additional information: <small>What country does the remittance come from?</small> <input type="text"/> <small>What do you primarily use the remittance for?</small> <input type="text"/>
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<input checked="" type="checkbox"/> Natures of Work / Business <small>Provide all applicable 'Codes'. (ex. ABC, DEF, GHI)</small> <input type="text"/>	<input checked="" type="checkbox"/> Name of Primary Employer / Business <input type="text"/>
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<input checked="" type="checkbox"/> Position / Job Title in Primary Employer / Business (Select one if you are 'Employed') <small>For Private / Self-Employed</small> <input type="radio"/> Owner / Director / Officer <input type="radio"/> Non-Officer / Employee <input type="radio"/> Contractual / Part-Time <small>For Government-Employed</small> <input type="radio"/> Elected / Appointee <input type="radio"/> Employee	<input checked="" type="checkbox"/> Gross Monthly Income (PHP) <input type="text"/>
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V. REGULATORY REQUIREMENTS

- Political Relations and Affiliations Questionnaire**
Do you have previous and current affiliation/dealings with the Government and/or relations to any government official in the Philippines or another country? If 'YES', accomplish 'Form A6' Yes No
- Foreign Account Tax Compliance Act (FATCA) Questionnaire** (Refer to 'Instructions' for details on the 'Substantial Presence Test')
Are you obligated to pay taxes to the U.S. IRS because of your citizenship, residency, or other reasons such as meeting the Substantial Presence Test? If 'YES', accomplish 'Form A7' Yes No
- Online Gaming Questionnaire** (Refer to 'Instructions' for details on 'Online Gaming Business')
Does your work / business provide service, process transactions, have transactions or related interests / relationships with any business or service provider in the online gaming industry? If 'YES', accomplish 'Form A8' Yes No
- Beneficial Ownership**
Are you opening this account on behalf of someone else? Yes No

VI. DATA PRIVACY CONSENT

In compliance with the requirements of the Data Privacy Act, I hereby give my consent to the BDO Group, consisting of BDO Unibank, Inc. and its subsidiaries (the members of the BDO Group may be accessed at [https://www.bdo.com.ph/privacy-statement]), to process, collect, store, my personal information or sensitive personal information obtained from me in the course of my transaction/s with the BDO Group. I understand and agree that these information may be disclosed or shared by BDO Group to its members for know-your-client, cross-selling, marketing, or profiling (manual or automatic) purposes to offer and provide new or related products and services of the BDO Group. Further, I hereby give my consent to any member of the BDO Group to process, collect, use, store, share or disclose my personal information or sensitive personal information to third parties for legitimate purposes, or to provide services to me or implement transactions which I may request, allow, or authorize.

I confirm that I understand and agree that my information may continue to be processed, collected, used, stored, or disclosed for ten (10) years from my last transaction date with any member of the BDO Group or until the expiration of the retention limits set by applicable laws, whichever comes later.

I hereby acknowledge and understand that should I wish to withdraw my consent to receive information about new or related products and services of the BDO Group, or to access, update, or correct certain personal data as set out in this form, I may communicate directly with the relevant member of the BDO Group's Data Protection Officer through the email address found at [https://bdo.com.ph/privacy-statement]. I further acknowledge and understand that I may access and view the BDO Group's Data Privacy Statement at [https://bdo.com.ph/privacy-statement] or obtain a copy thereof from the office or branch of the relevant member of the BDO Group.

Signature

VII. CONSENT FOR THE ISSUANCE OF A BDO CREDIT CARD

By signing, I agree that this shall serve as my application for issuance of a BDO Credit Card and I undertake to submit documents as may be deemed necessary by BDO. I authorize BDO to conduct random verification with government agencies or third parties to establish authenticity of the information declared and/or documents submitted and hereby waive confidentiality of the rules and laws as applicable. I understand that the issuance of a BDO Credit Card shall be subject to credit evaluation and discretion of BDO.

Signature

VIII. CUSTOMER UNDERTAKING

By signing, I hereby certify that the information given in this application is true and correct to the best of my knowledge and I confirm that I have read, understood, and agreed in full to the BDO Online Account Opening Service Terms and Conditions, Electronic Banking Terms and Conditions of Use, Terms and Conditions of the General and Special Provisions on Deposits, the BDO Debit Card Terms and Conditions, and the Terms and Conditions of BDO Biometrics (the "BDO Terms and Conditions") and have fully understood and agreed to be governed by the provisions thereof, as well as the rules and regulations of BDO, Bangko Sentral ng Pilipinas, Anti-Money Laundering Council, Bankers Association of the Philippines, Philippine Deposit Insurance Corporation, and the Bureau of Internal Revenue with respect to taxes imposed on interest on deposits and bank commission/charges relative to the establishment of operations of the account/s opened.

I also hereby affirm that the features, requirements, risks and benefits of the BDO product(s) and services I am availing were fully disclosed and explained clearly to me by BDO. I further declare that I have fully understood and agree to be governed by the rules and regulations of the BDO product(s) and services I am availing. I also acknowledge that the BDO Terms and Conditions were made available to me upon account opening, and where copies were given upon request and posted in BDO's website at bdo.com.ph/info/accounts. I agree that BDO may make amendments to the BDO Terms and Conditions by giving me notice by (i) exhibiting the same at any of BDO's branches, (ii) publishing the same at BDO's website or any media, or (iii) such other manner BDO deems fit.

Signature

Date Signed
(mm/dd/yyyy)

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REVISED AS OF JANUARY 2023

Account Number

Date Opened (mm/dd/yyyy)

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Residency

- Resident
- Non-resident

Biometrics

- Face
- Finger

RC

- N
- H

NLDS

ID 1

Type of ID ID Number

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ID 2

Type of ID ID Number

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Walk-In Referred By (please indicate below)

Verified By

Name and Signature

Approved By

Name and Signature

Courtesy Call / Remarks

CIF Number
(for internal use)

I. CUSTOMER INFORMATION

Business Name

Trade Name (SEC/DTI Approved)

Full Name

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth

(mm/dd/yyyy) / /

Position in Company (If owner, indicate % ownership)

Signatory Owner
 Officer

II. RELATED PARTY QUESTIONNAIRE

Are you a director, officer, or stockholder of BDO or BDO-affiliated company? Yes No
 If 'Yes', accomplish 'Part III' below. If 'No', you may skip to 'Part IV'

Are you a spouse or relative up to second degree, i.e. parent, child, grandparent, grandchild, brother, sister (biologically, legally adopted, or in-law) of a Director, Officer, Stockholder of BDO and/ or BDO-affiliated companies? Yes No
 If 'Yes', accomplish 'Part III' below. If 'No', you may skip to 'Part IV'

III. RELATED PARTY DUE DILIGENCE

Full Name of Relation / Affiliation

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Rank / Position of Relation / Affiliation

Relation or Affiliation via

BDO Unibank
 BDO affiliated company

Name of Affiliated Company

Full Name of Relation / Affiliation

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Rank / Position of Relation / Affiliation

Relation or Affiliation via

BDO Unibank
 BDO affiliated company

Name of Affiliated Company

Full Name of Relation / Affiliation

Last Name	First Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Rank / Position of Relation / Affiliation

Relation or Affiliation via

BDO Unibank
 BDO affiliated company

Name of Affiliated Company

IV. CUSTOMER UNDERTAKING

By signing, I hereby certify that the information in this form is true and correct to the best of my knowledge. I undertake to advise BDO Group and provide documentation for any changes to the above information.

Signature over Printed Name

Date Signed
(mm/dd/yyyy)

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