

| | | |
|---------------------|---------------------|-----------------------------|
| Realty Name _____ | Unit Manager _____ | Control No. _____ |
| Accreditation _____ | Broker's Code _____ | |

1. Company Profile

| | | |
|----------------------|--|--------------------------------------|
| Name of Realty _____ | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Corporation |
| REBL no. _____ | Validity _____ | |
| TIN no. _____ | Res. Cert. No. _____ | |
| Office Address _____ | Email Address _____ | |
| Telephone no. _____ | Designation _____ | |
| Fax no. _____ | Authorized Rep _____ | |

2. Broker Personal Profile

Name of Broker

| | | | |
|--|-------------------------|--|--|
| Last Name _____ | First Name _____ | Middle Name _____ | Nickname _____ |
| Present Home Address [No., Street, City, Municipality, Province] _____ | | | Zip _____ |
| Date of Birth _____ | Place of Birth _____ | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced |
| Age _____ years old | Citizenship _____ | Tax Identification Number _____ | SSS Number _____ |
| Mobile Number _____ | Home Phone Number _____ | Office Number _____ | Email Address _____ |

3. Educational Background

| | |
|--|-----------------------------|
| Highest Educational Attainment <input type="checkbox"/> College <input type="checkbox"/> Highschool <input type="checkbox"/> Others | Degree _____ Level _____ |
|--|-----------------------------|

4. Track Record In Real State

| | |
|-----------------------------------|---------------------------------|
| No. of Years in Real Estate _____ | No. of Years in Operation _____ |
| No. of Sales People _____ | Average Annual Income _____ |

5. Other Accreditation

| COMPANY | PROJECT | AMOUNT SOLD |
|---------|---------|-------------|
| | | |

6. Membership In Organization

| COMPANY | PROJECT |
|---------|---------|
| | |

I hereby commit to abide by, and/or achieve the following as the basis of my accreditation:

- ▶ Abide by the PPPVI Rules and Regulations and Code of Ethics governing PPVI accredited agents
- ▶ Attain the required sales production set by the PPPVI management;
- ▶ Actively participate in all PPPVI sales and marketing activities.

I understand that failure to attain any of the aforementioned conditions and any false statements /information herein may be grounds for PPPVI to disapprove my application for accreditation.

Signature over Printed Name

Date of Orientation

| | |
|------------------------------------|--|
| FOR PPPVI USE ONLY | |
| Type of Orientation _____ | Status of Application <input type="checkbox"/> Approved <input type="checkbox"/> Pending <input type="checkbox"/> Disapproved ▶ Others _____ |
| Date of Orientation _____ | Comments _____ |
| Date Processed _____ | Broker Conformity _____ |
| Expiry Date of Accreditation _____ | |

Certified By: _____

Approved By: _____

Broker Relations Head

Date

VP Sales and MArketing

Date