

## ACCREDITATION FORM BROKERS/SALESPERSON/SUB-AGENT

/ 2019 **DATE OF ACCREDITATION: POSITION APPLIED FOR:** (please check box) 1x1 ID Picture Independent Broker Recruited by: **Associate Broker** (under a Lead Broker) Recruited by: \_\_\_ Salesperson/Sub-Agent Recruited by: \_\_\_ How did you know about **Dataland, Inc.**? Referred by a Co-seller Website/online ☐ Walk-in Exhibit \_\_\_\_\_ **PERSONAL INFORMATIONS:** Name FIRST NAME LAST NAME \_\_\_\_\_\_ Age: \_\_\_\_\_ Gender Female : Male Date of Birth \_\_\_\_\_ Mobile Number:\_\_\_\_ E-mail Address: Residential Address \_\_\_\_\_ Course: \_\_\_\_\_ School:\_\_ \_\_\_\_\_ Year Graduated: \_\_\_\_\_\_ : \_\_\_\_\_\_ Date of expiry : \_\_\_\_\_\_ PRC ID License No. \_\_\_\_ Date issued HLURB Registration No.: SSS No. TIN No. COMPANY PROFILE: Phone Number: Company Name Office Address **BUSINESS HISTORY AS A REAL ESTATE PRACTIONER** (recent): Project(s) Sold Developer Year **LIST OF REQUIREMENTS TO BE SUBMITTED:** *If applicable:* 

- Photocopy of PRC ID and Certificate
- Photocopy of HLURB Registration
- Photocopy Tax Identification Card
- Photocopy of the Professional Tax Receipt (PTR)
- NBI Clearance or Police Clearance

- Photocopy of the Securities and Exchange Commission (SEC) Registration (for partnership and corporation);
- DTI Certificate
- Two (2) 1 x 1 recent ID Picture;
- Completely filled-up and signed Accreditation Form

## AKNOWLEDGEMENT:

As a real estate licensed practitioner, it is understood that I have familiarized myself with the various rules and guidelines relative to the real estate practice and commits to abide and comply with all its provisions, its implementing rules and regulations and all the laws governing real estate trade and business. I also certify that all the information given above is true and that Dataland, Inc. is authorized to obtain any further information as may be required to support the evaluation of my application.

SIGNATURE OVER PRINTED NAME

FOR DATALAND, INC. PERSONNEL ONLY:

OR DATABLED LINE I ERSONNEL CHELL			
Date of Accreditation			Trainer
	/	/2019	
Month	Day	Year	Signature over printed name