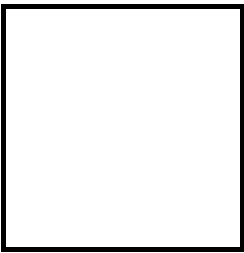


CAMARO VILLAS

BUYER'S INFORMATION



PERSONAL INFORMATION									
LAST NAME			GIVEN NAME				MIDDLE MAIDEN NAME		
SEX	<input type="checkbox"/> M <input type="checkbox"/> F	AGE	BIRTHDAY		TIN	CTC#	ISSUED AT	ISSUED ON	
CIVIL STATUS							NATIONALITY		
<input type="checkbox"/> SINGLE		<input type="checkbox"/> MARRIED ___ YRS.		<input type="checkbox"/> WIDOWED ___ YRS.		<input type="checkbox"/> SEPARATED ___ YRS.			
HOME ADDRESS				YEARS OF RESIDENCY		HOME TELEPHONE NO.			
HOME OWNERSHIP		<input type="checkbox"/> OWNED, MORTGAGE			<input type="checkbox"/> RENTED		E-MAIL ADD & CEL #		
		<input type="checkbox"/> OWNED, NOT MORTGAGE			<input type="checkbox"/> WITH RELATIVES/PARENTS				
OCCUPATION/POSITION			EMPLOYER/COMPANY				YRS OF EMPLOYMENT		
NATURE OF BUSINESS (IF SELF EMPLOYED)			BUSINESS/COMPANY'S NAME				WHEN ESTABLISHED		
BUSINESS ADDRESS						BUSINESS TEL./FAX NO.			
BILLING ADDRESS									

SPOUSE INFORMATION							
NAME OF SPOUSE (LAST NAME, GIVEN NAME, MIDDLE/MAIDEN NAME)							
AGE	BIRTHDAY	TIN	COMMUNITY TAX CERTIFICATE NO.	ISSUED AT	ISSUED ON	NATIONALITY	
OCCUPATION/ POSITION			BUSINESS/COMPANY'S NAME			WHEN ESTABLISHED	
BUSINESS ADDRESS					BUSINESS TEL./FAX NO.		
NAME OF CHILDREN FROM OLDEST TO YOUNGEST			AGE	HIGHEST EDUCATIONAL ATTAINMENT			

PERSONAL REFERENCES			
NAME	ADDRESS	TEL. NO.	RELATION
1			
2			
3			

FINANCING TERMS
 In-House Bank Financing HDMF Others Pls. Specify _____

HOW DID YOU COME TO KNOW ABOUT OUR PROJECT?
 NEWSPAPER/MAGAZINE/ADS FLYERS STREAMERS/POSTERS EXHIBITS REFERRED BY: _____

SALES AGENT	
SALES MANAGER	
BROKER GROUP HEAD	
MARKETING HEAD	PROPERTY 101, INCORPORATED

FINANCIAL INFORMATION

ASSETS AND LIABILITIES

MONTHLY INCOME AND EXPENSES

ASSETS

CASH ON HAND/BANK _____
 STOCK AND BONDS _____
 REAL ESTATE _____
 MOTOR VEHICLES OWNED _____
 OTHERS (Specify) _____

 TOTAL ASSETS _____

INCOME

	BORROWER	SPOUSE/OTHER
INCOME	_____	_____
SALARIES	_____	_____
ALLOWANCES	_____	_____
COMMISSIONS	_____	_____
RENTAL INCOME	_____	_____
OTHERS (Specify)	_____	_____
_____	_____	_____
_____	_____	_____

LIABILITIES

UNSECURED LOAN _____
 OTHERS (Specify) _____

 TOTAL LIABILITIES _____

GROSS MONTHLY INCOME _____
 WITHHOLDING TAX _____
 COMBINED NET MONTHLY INCOME _____

EXPENSES (Combined for Borrower/Spouse/OTHERS)

Living and Utilities	_____
Education	_____
Transportation	_____
Loan Amortization	_____
Others (Specify)	_____
_____	_____
_____	_____

NET WORTH (ASSETS-LIABILITIES)

Combined Monthly Expenses _____
 Combined Net Disposable Income _____

BANK ACCOUNTS (indicate your 3 most active)

BANK	BRANCHES/ADDRESS	TYPE OF ACCOUNT	ACCOUNT NO.	DATE OPENED	AVE. BALANCE

CREDIT CARDS OWNED

CARD COMPANY	BANK ISSUER	CREDIT LIMIT	CARD NO.	EXPIRY DATE

I / We hereby affirm that all the information contained in this application and all supporting documents are true and correct

CO-BORROWER / SPOUSE SIGNATURE OVER PRINTED NAME

BUYER'S SIGNATURE OVER PRINTED NAME