



New Customer

Customer Records Update (for existing SMART customers)

BUSINESS CUSTOMER INFORMATION FORM

To be filled out by the Customer

Date Accomplished/Signed:

BASIC CUSTOMER INFORMATION

Registered Business Name:	Main Telephone No./Trunkline:
	Fax No.:
Store/Shop/Outlet Name/Trade Name:	Customer's E-mail Address:
Business Address:	Website:
Billing Address (if different from Business Address):	
Names of Bill Recipients	1 .
	2 .
Contact numbers of Bill Recipients	1 .
	2 .
Email Address of Bill Recipients	1 .
	2 .
Business Ownership:	<input type="checkbox"/> Private <input type="checkbox"/> Government
Tax Class:	<input type="checkbox"/> VAT Exempt/ Zero-Rated <input type="checkbox"/> With VAT <input type="checkbox"/> Others, please specify
SEC Registration No.	Company TIN:
Industry Type :	Please specify

AUTHORIZED SIGNATORY INFORMATION

Name of Authorized Signatory:	Position and E-mail Address:	Contact No. [Landline No. & Mobile No.]
ID Presented:	<input type="checkbox"/> Company ID; ID No. _____ <input type="checkbox"/> Passport; ID No. _____ <input type="checkbox"/> Others _____ ; ID No. _____ <input type="checkbox"/> Driver's License; ID No. _____ <input type="checkbox"/> SSS/GSIS ID; ID No. _____	

ORGANIZATION DATA

Type of Business (Check only one)	<input type="checkbox"/> SINGLE PROPRIETORSHIP	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> CORPORATION
Date of Registration:	No. of Employee(s)/Staff:	Years in Operation:	

FOR CORPORATION

Key Officers (indicate the name and position/designation)	Contact No.	Email Address

FOR PARTNERSHIP - Name of Partners

Name and Position/Designation	Contact No.	Email Address
1 .		
2 .		
3 .		

FOR SOLE PROPRIETORSHIP

Name of Owner :	Date of Birth:
SSS No.:	Personal TIN No.:
Home Address:	Telephone No.:
FAX No.:	Mobile No.:
	Email Address:

SOLE PROPRIETOR DISCLOSURE

My signature below signifies that

1. I hereby authorize PLDT INC. and/or any person authorized by PLDT to obtain relevant and pertinent personal information about myself and credit information from the PLDT Group, its subsidiaries, affiliate banks, credit card companies, and other financial institutions in the course of evaluating my application, and I authorize the release of such information by these companies from which my personal data and credit information are requested. I also consent to PLDT's disclosure of information concerning myself or my subscription to these companies. I acknowledge that a complete list of the entities under the PLDT Group can be accessed by myself on the PLDT website [<http://www.pldt.com/privacy-policy>]

2. I also hereby authorize PLDT to use and disclose to the PLDT Group and its subsidiaries and its authorized business partners all information contained in this application including supporting documents submitted, as well as all information in connection with my subscription, my network/service usage and connections including data about the device/e I use to connect to your service, my payment history/behavior with respect to my subscription, and all information about myself from your advertisers and business partners, for purposes of (a) facilitating my application for services which they offer; (b) product and service improvement being offered to me by PLDT Group and its subsidiaries and its authorized business partners; (c) advertising new products and services being offered by PLDT Group and its subsidiaries and its authorized business partners; (d) credit investigation and establishing my credit worthiness; and (e) improving customer experience.

I hereby declare that all the above information are true and correct to my own knowledge. I hereby authorize PLDT/SMART/SUN to verify any of the above given information from whatever source it may consider appropriate. Any misrepresentation on the above information shall constitute a just cause for the rejection of my application or the termination of my contract with the Company.

Authorized Signatory/Signature above
Printed Name

Position

Date

TO BE FILLED OUT BY PLDT/SMART/SUN AUTHORIZED SALES PERSONNEL

DOCUMENTARY REQUIREMENTS

Please check compliance of documents based on the type of business (Corporation, Partnership, Sole Proprietorship)

CORPORATION	PARTNERSHIP	SOLE PROPRIETORSHIP
<input type="checkbox"/> Accomplished Business Customer Information Form	<input type="checkbox"/> Accomplished Business Customer Information Form	<input type="checkbox"/> Accomplished Business Customer Information Form
		<input type="checkbox"/> Business Permit/Mayor's Permit
<input type="checkbox"/> Corporate Secretary Certificate or Notarized Board Resolution (indicating name of authorized signatory to sign/transact business with PLDT in behalf of the company)	<input type="checkbox"/> Notarized Authority from the Partners (indicating the authorized signatory to sign/transact business with PLDT in behalf of the partnership).	<input type="checkbox"/> Special Power of Attorney - if the document/conforme is not signed by the owner himself
<input type="checkbox"/> Photocopy of Valid ID with signature of authorized signatory Valid ID's: Passport, Driver's License, SSS, GSIS, TIN, PRC License (any 1)	<input type="checkbox"/> Photocopy of Valid ID with signature of authorized signatory Valid ID's: Passport, Driver's License, SSS, GSIS, TIN, PRC License (any 1)	<input type="checkbox"/> Photocopy of Valid ID with signature of owner/proprietor. Valid ID's: Passport, Driver's License, SSS, GSIS, TIN, PRC License (any 1)

ADDITIONAL REQUIREMENTS FOR CORPORATION/PARTNERSHIP/SOLE PROPRIETORSHIP, IF APPLICABLE

- NTC Certificate of Registration [For Internet Service Providers, Cable TV Operators, Broadcast Networks, Telecom Companies, Value Added Services and Content Providers]
- Tax Exemption Certificate. (For companies situated in ECOZONES, qualified Embassies and respective qualified diplomats, Foreign administrations, BOI, PEZA, SUBIC, CLARK registered entities. For companies claiming for tax exemption, additional documents are: BIR Form 2303, BIR Form 0605 (current year), PEZA Certificate of Tax Exemption (current year)
- SEC Form F-104/F-108 for Foreign Corporation (in lieu of Articles of Incorporation)
- Proof of Billing Address, any utility bills. (Only required if billing address is different from the business address and site address)

ADDITIONAL REQUIREMENTS FOR GOVERNMENT AGENCIES

- Executive Order or Republic Act stating the creation of the particular agency
- General Order [for military agencies] or Letter of Instruction
- Appointment papers and photocopy of ID of the authorized signatory
- Certification of Funds or Budget allocation for Communication Expense

SERVICE REQUEST DETAILS

TYPE OF SERVICE (Proposed service)	QUANTITY	Estimated Monthly Recurring Charge (MRC) - VAT Exclusive	
		PHP	USD
1.			
2.			
		TOTAL =	

CERTIFICATION [To be filled out by Authorized Sales Personnel]

<u>TO FOLLOW DOCS</u>	<u>Deviation Request</u> [please indicate justification]
To be submitted on or before : _____	<input type="checkbox"/> Bill Above <input type="checkbox"/> Await Payment <input type="checkbox"/> Deferment of Document submission <input type="checkbox"/> Reduction of Advance Payment

I hereby declare and certify that all the above information and documents submitted are validated true and correct. Likewise, I am vouching the authenticity and legal existence of above mentioned customer and that the person who signed the BCIF/Contract/Conforme/Service Application Form is the designated authorized

Submitted/Vouched by: _____
(Sales Personnel)

Noted by: _____
(Sales Head)

PLEASE SIGN OVER PRINTED NAME

PLEASE SIGN OVER PRINTED NAME

Date: _____

Date: _____

SALES TEAM : _____

CUSTOMER NAME: _____

FOR CREDIT USE ONLY

Approved _____
Amount of Advance Payment required: _____

Disapproved _____
Notes : _____

Evaluated by: _____
Credit Analyst (Sign over printed name)

Date: _____