



# AGDAO MULTI-PURPOSE COOPERATIVE

Head Office: AMPC Green Bldg., N. Torres St. corner Urduja Ext., Obrero, 8000 Davao City

## HOME-EQUITY SAVINGS APPLICATION FORM

Branch: \_\_\_\_\_

Date of Application: \_\_\_\_\_

### Personal Information

FULL NAME

\_\_\_\_\_ Last Name                      \_\_\_\_\_ First Name                      \_\_\_\_\_ Middle Name

PRESENT ADDRESS:

\_\_\_\_\_ House No./Block No                      Street/Purok                      Subdivision/Apartment

\_\_\_\_\_ Barangay                      City/Municipality                      Province

GENDER M (  ) F (  )                      BIRTHDAY (dd/mm/yy) \_\_\_\_\_                      CIVIL STATUS \_\_\_\_\_

OCCUPATION \_\_\_\_\_                      EMPLOYER/BUSINESS \_\_\_\_\_

### Membership Information

How did you know about this product?

(  ) Fliers/Banners/Posters                      (  ) Referred by a Staff                      (  ) Others, pls specify:  
(  ) Internet/TV Ads/Radio Ads                      (  ) Referred by a Member

Do you have any other deposits in AMPC other than regular savings                      Yes (  )                      No (  )

If yes, please specify: \_\_\_\_\_

Initial Deposit: P \_\_\_\_\_                      Frequency of installment:                      (  ) Monthly

Amount of Installment: P \_\_\_\_\_                      (  ) Quarterly                      (  ) Semi-Annually

Savings Period:                      (  ) 5 years                      (  ) 8 years                      (  ) 10 years

\_\_\_\_\_  
Printed Name and Signature of Applicant

\_\_\_\_\_  
Contact/Telephone Number

*pls do not fill-up below this line*

### FOR INTERNAL USE ONLY

Checked by:

Approved by:

\_\_\_\_\_  
Printed Name and Signature

\_\_\_\_\_  
Branch Manager/OIC

I.D. Presented

Date \_\_\_\_\_

*Note: This application should be accomplished together with the installment savings agreement (duplicate copy)*