



REQUEST FORM FOR EXTENSION CARD

PLS FILL OUT COMPLETELY THE FOLLOWING INFORMATION OF REQUESTED EXTENSION CARDHOLDER

Name of Extension: <i>(FN, MN, LN)</i>		Birthdate: <i>(mm/dd/yyyy)</i>	Age:	Gender:
Present Address:			Telephone No:	
			Mobile Number:	
Permanent Address:			Telephone No:	
			Mobile Number:	
Company/Business Name:		Telephone No:	TIN:	
			GSIS/SSS No.:	
Office/Business Address:				
Position/Nature of Work:			Annual Income:	
Mothers Maiden Name: <i>(FN, MN, LN)</i>	Place of Birth:	Marital Status:	Nationality:	
Spouse Name:	Occupation:	Birthdate: <i>(mm/dd/yyyy)</i>	TIN:	
Other Source of Income (Nature of Business):		Annual Income:		
(If Student) Name of School:				
School Address:				

RELATIONSHIP TO PRINCIPAL CARDHOLDER: _____

I understand that, if issued, the extension card will bear a different card number. Nevertheless, in all cases, all purchases/ transactions made through the use of the extension card will be billed to me as principal cardholder.

The extension cardholder has read and understood the terms and conditions set forth in my signed application form and agree to use his/her extension card accordingly. He/she agrees to be held jointly and severally liable with me for payment of obligations under the application/agreement.

PLEASE ATTACH PHOTOCOPY OF VALID ID OF EXTENSION CARDHOLDER

PRINCIPAL CARDHOLDER'S SIGNATURE : _____

PRINCIPAL CARDHOLDER'S NAME : _____

CARD NUMBER : _____

EXTENSION CARDHOLDER'S SIGNATURE : _____

EXTENSION CARDHOLDER'S NAME : _____

Please send personally to the nearest LANDBANK branch or to LANDBANK Visa 28th Floor LANDBANK PLAZA 1598 M.H. Del Pilar cor. Dr. J. Quintos St. Malate, Manila