

<input type="checkbox"/> <b>PLEASE CHANGE MY PNB CREDIT CARD TO:</b> <input type="checkbox"/> <b>PLEASE ISSUE ADDITIONAL CREDIT CARD:</b>	<input type="checkbox"/> <b>PLEASE INCREASE MY CREDIT LIMIT/S TO:</b>												
<table style="width:100%; border: none;"> <tr> <td style="border: none;"><input type="radio"/> PNB Essentials Mastercard</td> <td style="border: none;"><input type="radio"/> PNB Diamond UnionPay*</td> </tr> <tr> <td style="border: none;"><input type="radio"/> PNB Platinum Mastercard</td> <td style="border: none;"><input type="radio"/> PNB Classic Visa</td> </tr> <tr> <td style="border: none;"><input type="radio"/> PNB Ze-Lo Mastercard</td> <td style="border: none;"><input type="radio"/> PNB Gold Visa</td> </tr> <tr> <td style="border: none;"><input type="radio"/> PNB-PAL Mabuhay Miles NOW Mastercard</td> <td style="border: none;"><input type="radio"/> Others _____</td> </tr> <tr> <td style="border: none;"><input type="radio"/> PNB-PAL Mabuhay Miles Platinum Mastercard*</td> <td></td> </tr> <tr> <td style="border: none;"><input type="radio"/> PNB-PAL Mabuhay Miles World Mastercard*</td> <td></td> </tr> </table> <p style="font-size: small; margin-top: 5px;">*If no selection is made, default is single currency.  <input type="checkbox"/> Single Currency    <input type="checkbox"/> Dual Currency</p> <p style="font-size: x-small; margin-top: 5px;">Note: For credit card upgrade, please attach income documents.</p>	<input type="radio"/> PNB Essentials Mastercard	<input type="radio"/> PNB Diamond UnionPay*	<input type="radio"/> PNB Platinum Mastercard	<input type="radio"/> PNB Classic Visa	<input type="radio"/> PNB Ze-Lo Mastercard	<input type="radio"/> PNB Gold Visa	<input type="radio"/> PNB-PAL Mabuhay Miles NOW Mastercard	<input type="radio"/> Others _____	<input type="radio"/> PNB-PAL Mabuhay Miles Platinum Mastercard*		<input type="radio"/> PNB-PAL Mabuhay Miles World Mastercard*		PHP _____ / USD _____  I understand that my approved aggregate credit limit shall be applicable to all my PNB Credit Cards, including all its Supplementary Cards. This will still be subject to credit evaluation.  For dual currency cards, local transactions are billed in Peso while international transactions are billed in US Dollars. There will be separate monthly statements for Peso and Dollar Billings.  Note: Please attach any of the following income documents: ITR, 1 month latest payslip, or active principal credit card number (with at least 1 year membership)
<input type="radio"/> PNB Essentials Mastercard	<input type="radio"/> PNB Diamond UnionPay*												
<input type="radio"/> PNB Platinum Mastercard	<input type="radio"/> PNB Classic Visa												
<input type="radio"/> PNB Ze-Lo Mastercard	<input type="radio"/> PNB Gold Visa												
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<input type="radio"/> PNB-PAL Mabuhay Miles Platinum Mastercard*													
<input type="radio"/> PNB-PAL Mabuhay Miles World Mastercard*													

<input type="checkbox"/> <b>MODE OF PAYMENT</b> <p style="margin-top: 5px;"><input type="radio"/> Auto Debit Arrangement (ADA)  <input type="checkbox"/> Full Amount    <input type="checkbox"/> Minimum Amount  <small>If selection is not checked, payment will automatically be minimum amount.</small></p> <p><b>Account to Auto Debit</b></p> <p><b>Peso</b>                  Account: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>  <small>FOR PESO BILLS ONLY</small></p> <p><b>Dollar</b>                  Account: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>  <small>FOR DOLLAR BILLS ONLY</small></p> <p><input type="radio"/> Pay to Bank    <input type="checkbox"/> Peso Bills    <input type="checkbox"/> Dollar Bills</p> <p style="font-size: x-small; margin-top: 5px;">If the account number does not belong to the principal cardholder, kindly attach an authorization letter signed by the depositor and signature verified by branch officer/ personnel. Request for ADA will apply to the indicated/specified card number only. If account is under a company/corporation, submission of secretary's certificate or board resolution is required. If sole proprietorship, DTI/SEC permit is required.</p>	<input type="checkbox"/> <b>INFORMATION UPDATE</b> <p style="margin-top: 5px;">Please update the following details:</p> <p><input type="radio"/> <b>Contact Number/s:</b>                  Mobile Number: Principal: _____                    Supplementary: _____</p> <p>Home Tel No.: _____                  Office Tel No.: _____</p> <p><input type="radio"/> <b>Address:</b>                  Home Address: _____                    _____</p> <p>Office Address: _____                    _____</p> <p>Preferred Billing Address: <input type="checkbox"/> Home    <input type="checkbox"/> Office</p> <p><input type="radio"/> <b>Email Address:</b>                  Principal: Old: _____                    New: _____</p> <p>Supplementary: Old: _____                    New: _____</p>				
<input type="checkbox"/> <b>PLEASE REPLACE MY CARD DUE TO:</b> <table style="width:100%; border: none; margin-top: 5px;"> <tr> <td style="border: none;"><input type="checkbox"/> Correction **</td> <td style="border: none;"><input type="checkbox"/> Change of Name **</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Damaged Card</td> <td style="border: none;"><input type="checkbox"/> Others _____</td> </tr> </table> <p style="font-size: x-small; margin-top: 5px;">** Attach a valid ID and supporting documents such as birth certificate, marriage certificate and the like.</p> <p>First Name: _____                  Middle Name: _____                  Last Name: _____                  Suffix: _____</p>	<input type="checkbox"/> Correction **	<input type="checkbox"/> Change of Name **	<input type="checkbox"/> Damaged Card	<input type="checkbox"/> Others _____	
<input type="checkbox"/> Correction **	<input type="checkbox"/> Change of Name **				
<input type="checkbox"/> Damaged Card	<input type="checkbox"/> Others _____				

<input type="checkbox"/> <b>SUPPLEMENTARY CARD</b> <p style="margin-top: 5px;">1. _____    _____                  Last Name    Suffix</p> <p>_____    _____                  First Name</p> <p>_____    _____                  Middle Name</p> <p>Sub-limit: _____</p> <p style="font-size: x-small; margin-top: 5px;">For Sub-limit: Principal cardholder assigns the sub-limit. Specify the amount, rounded off to the nearest thousand. If not specified, the default sub-limit is 100%.</p> <p>Mobile Number: _____ Email Address: _____                  Birthday (mm/dd/yyyy): _____</p> <p>Gender: _____ Civil Status: _____                  (IF MARRIED)</p> <p>Name of Spouse: _____ Birthday (mm/dd/yyyy): _____                  (mm/dd/yyyy): _____</p> <p>Relationship to Principal Cardholder: _____                  Mother's Maiden Name: _____</p> <p>_____                  Signature of Supplementary Cardholder</p>	2. _____    _____ Last Name    Suffix
<p>I understand that, if issued, the supplementary card will bear a different card number. Nevertheless, in all cases, all purchases/transactions made through the use of supplementary card will be billed to me. The supplementary cardholder/s has read and understood the Terms and Conditions of PNB Credit Cards and agrees to use his/her supplementary card accordingly. He/she agrees to be held jointly and severally liable with me for the payment of obligations under the agreement.</p>	_____    _____ First Name
<p>_____    _____                  Middle Name</p> <p>Sub-limit: _____</p> <p style="font-size: x-small; margin-top: 5px;">For Sub-limit: Principal cardholder assigns the sub-limit. Specify the amount, rounded off to the nearest thousand. If not specified, the default sub-limit is 100%.</p> <p>Mobile Number: _____ Email Address: _____                  Birthday (mm/dd/yyyy): _____</p> <p>Gender: _____ Civil Status: _____                  (IF MARRIED)</p> <p>Name of Spouse: _____ Birthday (mm/dd/yyyy): _____                  (mm/dd/yyyy): _____</p> <p>Relationship to Principal Cardholder: _____                  Mother's Maiden Name: _____</p> <p>_____                  Signature of Supplementary Cardholder</p>	_____    _____ First Name

REFERRER'S DETAILS (For Bank Use Only)			
Solicitor's Name: _____	Branch Name: _____		
Employee Number: _____	Branch Code: _____		

Your privacy is our concern. PNB is taking reasonable efforts to protect your personal data and prevent unlawful incidents in compliance with Data Privacy Act (R.A. 10173). Should you wish to report incidents or update your Credit Card information, please call us immediately. For more details about how PNB processes personal data, you may access PNB Privacy Policy Statement at [www.pnb.com.ph](http://www.pnb.com.ph).

NAME OF PRINCIPAL CARDHOLDER	CARD NUMBER	PRINCIPAL CARDHOLDER'S SIGNATURE
MOBILE NUMBER	MABUHAY MILES NUMBER	DATE
Note: If request was coursed through the branch, branch officer/personnel should verify the signature.		