
(Date)

OFFER TO BUY

**ASSET SALES DEPARTMENT
PHILIPPINE SAVINGS BANK**

16/F PSBank Center
777 Paseo de Roxas cor. Sedefio St., Makati City, 1226
☎ (632) 8885-8335

Sir/Madam :

I/We offer to buy your property as follows:

Subject Property (the "Property")	[] Residential [] Commercial/Industrial [] Agricultural		
	Description: [] House & Lot [] Condominium [] Vacant Lot		
	Location:		
Offer Price	Amount in Words	PhP	
Manner of Payment	<input type="checkbox"/> Cash <input type="checkbox"/> Home Loan: [] via PSBank Home Loan, ____ years to pay <input type="checkbox"/> Other Bank/Financial Institution		

subject to the following terms:

1. My/Our Offer(the "Offer") is on AS IS WHERE IS" basis;
2. The Offer is subject to the discretion of PSBank. If the Offer is rejected, PSBank is not obligated to disclose its reason;
3. The sale of the Property is subject to the terms and conditions of the Notice of Approval of the Offer (NOA) and Deed of Sale which PSBank shall issue on the Property;
4. Within five (5) banking days from receipt of NOA, I/we shall pay in full the purchase price [if cash payment] / required downpayment [if via home loan], as well as the documentary stamp tax, fees, and/or charges for the transfer of title on the Property, as may be indicated in the NOA. By paying them in full, it is understood that I have agreed and expressed my conformity to the terms and conditions of the NOA. I further undertake to submit to PSBank the NOA, with my/our conformity thereon, via email, mail, or personal delivery.
5. Without need of prior notice, PSBank has the right to withdraw its approval of the Offer in case of my/our non-compliance with the terms therein, and to offer the Property to other prospective buyers.
6. PSBank sells only whatever rights, interests and participation it has acquired on the Property, and I/we are charged with full knowledge of the nature and extent of said rights, interests and participation.
7. I/We inspected and conducted the required diligence on the Property, and I/we have ascertained and accepted its status and condition, without solely relying on any representation by PSBank on the Property.
8. In submitting this Offer, I/we authorize PSBank to receive, use, process, store, make profile, or share to any of its affiliates and/or subsidiaries within the Metrobank Group, any third party, agent or service provider who provides related services to PSBank, and any government agency/regulatory body/branch, which in turn is/are authorized to receive, the Information provided herein, without prior notice: (a) in order to facilitate and/or consummate the transaction herein; (b) for the protection of either party against fraud; (c) in the validation, verification, or updating of the Information; (d) in order for PSBank to enforce its rights or perform its obligations by reason of any law or regulation, contract, or order from any court or quasi-judicial and administrative offices; and (e) in the prosecution or defense of PSBank or its directors/officers/employees with regards to disputes or claims pertaining to the transaction herein. By giving the foregoing authorities and in order for PSBank to fully exercise the same, I/we hereby dispense any related right accorded to me under Republic Act No. 10173 (Data Privacy Act of 2012) or applicable laws, which are inconsistent with those authorities.

Thank you.

Very truly yours,


Mobile Number: _____
Email Address: _____
Telephone No.: _____

(Signature over Printed Name)

Source (please check one):

____ PSBank Website ____ PSBank Facebook ____ Online ad (pls specify) [megamanilarealty advertisements online](#)

REFERROR'S/BROKER'S INFORMATION (if any):

Name: DIOSDADO A. MENDOZA Signature: 
Branch: _____ REBL No. PRC No. 0000616
Mobile No. 09173158880 Residential/Office No. _____
Email Address: megamanilarealty@yahoo.com TIN No. 173-101-796-000

www.psbank.com.ph | Customer Experience Hotline: (02) 8845-8888
PSBank LiveChat via www.psbank.com.ph | Visit your nearest PSBank branch



BUYER'S INFORMATION SHEET

ASSET SALES DEPARTMENT

Name of Buyer:			
Permanent Address:			Telephone No/s:
Present Address:			
Preferred Mailing / Billing Address:			
Date of Birth:(mm/dd/yy)	Place of Birth:	Email Address:	Mobile Phone No/s:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Nationality: <input type="checkbox"/> Filipino <input type="checkbox"/> Others: _____	Civil Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated	
Employment Status: <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Others:		Name of Employer / Business:	
		Nature of Work / Business:	
Office Address:			Telephone No/s:
Position/Title:		Years w/ Company:	
TIN		PHIL ID No.:	
*Note: Pls. attach the appropriate written authorization (SPA for individual buyer; Secretary's Certificate/Board Resolution for corporate buyer).			
SPOUSE INFORMATION (If Applicable)			
Name:			
Permanent Address:			Telephone No/s:
Present Address:			Nationality: <input type="checkbox"/> Filipino <input type="checkbox"/> Others _____
Date of Birth:(mm/day/year)	Place of Birth:	E-mail Address:	Mobile Phone No/s:
<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Others:	Name of Employer / Business:		
	Nature of Work / Business:		
Office Address:			Telephone No/s:
Position/Title:		Years w/ Company:	
TIN		PHIL ID No.	
AUTHORIZED REPRESENTATIVE (If Applicable)			
Name:			
Address:			Telephone / Mobile Phone No/s:
FINANCIAL INFORMATION			
GROSS MONTHLY INCOME	BUYER	SPOUSE	TOTAL
Source of Funds			
Salaries and Allowances	_____	_____	_____
Business	_____	_____	_____
Others (Pls. Specify)	_____	_____	_____
_____	_____	_____	_____
TOTAL MONTHLY INCOME	_____	_____	_____
CREDIT AND BANK REFERENCES			
Bank / Financial Institution	Contact Number	Type of Account	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
For Married Buyers:			
For purposes of preparing the Contract to Sell / Deed of Absolute Sale, I/we want the document/s to be in (check box):			
<input type="checkbox"/> My name (with marital consent)		<input type="checkbox"/> Our names as SPOUSES	
Preferred Mailing / Billing Address: <input type="checkbox"/> Home <input type="checkbox"/> Others: (pls. specify)			
<input type="checkbox"/> Office			
Do you or your spouse have a relative (up to 2nd degree i.e. children, parents/parents-in-law, children-in-law, brothers/sisters, brothers/sisters-in-law) working at PSBank or in any entity under Metrobank Group/GT Capital Holdings, Inc./First Metro Investment Corp. (FAMI) Group? Yes () No ()			
If yes, Name _____		Relationship _____	

I/WE HEREBY CERTIFY that the above information are true, correct, accurate and complete. I/WE also authorize PSBank to obtain information from my banks, employer and other references listed herein. Filling out of this information and affixing my/our signature herein constitute my/our written and formal consent as required by Republic Act 10173 (Data Privacy Act) for PSBank to receive, process, and share my personal and confidential information for the purpose of processing and evaluating my proposal to buy the foreclosed property of the Bank, and to dispense any related rights accorded to me by RA 10173 and other applicable law, which are inconsistent with these authorities.

Signature Over Printed Name

Signature Over Printed Name