



**LAND BANK OF THE PHILIPPINES
SPECIAL ASSETS DEPARTMENT**

CHECKLIST OF REQUIREMENTS FOR ROPA BUYERS
(Complete requirements to be submitted)

Buyer's Name : _____
Address : _____
Contact No.: _____ Fax No.: _____

BASIC REQUIREMENTS (CORPORATION AND INDIVIDUAL)

Direct Buyer

- ☐ Deposit of at least 10% of the Purchase Price
- ☐ Filled up Customer Information Sheet
- ☐ Filled up Negotiated Sale Offer Form (Form 6) Photocopy
- ☐ of two (2) Valid ID's duly signed by the Buyer
- ☐ BIR-stamped Income Tax Return (last 3 years) / Certificate of Deposit (for cash basis)
- ☐ Tax Identification Number
- ☐ Marriage Contract, if applicable

with Broker/Referrer

- ☐ Deposit of at least 10% of the Purchase Price
- ☐ Filled up Customer Information Sheet
- ☐ Filled up Referral Form (for Referrer) & Broker's Registration Letter - for Buyers (Form 4)
- ☐ Filled up Negotiated Sale Offer Form (Form 5)
- ☐ Photocopy of two (2) Valid ID's duly signed by the Buyer
- ☐ BIR-stamped Income Tax Return (last 3 years) (installment basis) / Certificate of Deposit (cash basis)
- ☐ Tax Identification Number
- ☐ Marriage Contract, if applicable

**ADDITIONAL REQUIREMENTS:
CORPORATION**

- ☐ SEC Certificate of Registration of Articles of Incorporation & By-Laws & amendments thereto, if any. 1/
- ☐ Articles of Incorporation and By-Laws & amendments thereto, if any. 1/
- ☐ Board Resolution/Secretary's Certificate authorizing the transaction, authorized representative and signatory/s with the corresponding specimen signature/s. 1/
- ☐ Latest General Information Sheet submitted to SEC. 1/
- ☐ Photocopy of two (2) Valid ID's of the authorized representative. 2/
- ☐ Audited Financial Statement (last 3 years) or Project Study (if start up 3/).

INDIVIDUALS

Employed/Salaried

- ☐ Certificate of Income and Employment (Exhibit A)

Overseas Filipino Workers

- ☐ Certificate of Income and Employment
- ☐ Employment Contract
- ☐ Consularized Special Power of Attorney (Exhibit B) authenticated by the Department of Foreign Affairs.

Self-employed

- ☐ DTI Registration
- ☐ Mayor's Business Permit
- ☐ Audited Financial Statements (last 3 years).

1/ must be duly certified by the Corporate Secretary

2/ must be duly certified by the Corporate Secretary and the authorized representative

3/ subject to verification and validation



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OTHER REQUIREMENTS

- ☐ Letter of Guaranty issued by: ☐ LBP-PFO ☐ LBP-MBD ☐ PAG-IBIG/SSS/GSIS
☐ Bank: _____
☐ Certificate of Deposit: _____

OTHER DOCUMENTS TO BE SUBMITTED AS APPLICABLE

1. **LEGALLY SEPARATED.** If buyer is legally separated, he/she must submit a copy of the Court Order or decree granting the legal separation. This is to be submitted prior to execution of the Deed of Sale to facilitate registration of the said property.
2. **NON-CONJUGAL PROPERTIES.** If a married buyer wants to indicate that there is a separation of properties between him/her and his/her spouse, a copy of the Court Order to this effect should also be submitted prior to execution of the Deed of Sale.
3. **MINORS.** If buyer wants to register the property in behalf of his/her children or beneficiaries who are minors, a copy of the guardianship or trusteeship papers must be submitted prior to execution of the Deed of Sale.
4. **FILIPINO WITH FOREIGN SPOUSE.** If buyer of real property is a Filipino citizen married to a foreigner, the foreigner spouse must present an affidavit that the funds used to purchase the property came completely from the paraphernal funds of the wife-buyer or from the capital assets of the husband-buyer, as the case may be. This is to be submitted upon the signing of the Deed of Sale to facilitate registration of the said property.
5. **BALIKBAYAN.** If buyer is a *balikbayan* under the government's program, he/she must submit an affidavit showing the date and place of the transferee's birth, the names and addresses of his parents, of his spouse and children, if any; the area, the location, and the mode of acquisition of his land holdings in the Philippines, if any; his intention to reside permanently in the Philippines; the date he lost his Philippine citizenship, and the country of which he is presently a citizen. This is required document for registration of the property and must be submitted prior to execution of the Deed of Sale.
6. **DUAL CITIZENS.** For those who have re-acquired Philippine citizenship under R.A. 9225 (Dual Citizenship Act), they shall submit duly certified and authenticated copies of the Order of Approval, Oath of Allegiance and Identification Certificate/s.
7. **OVERSEAS FILIPINO WORKERS (OFWs).** For non-Philippine residents or OFWs, etc., required documents must be submitted: two (2) Valid IDs with photo, copy of job contract, Special Power of Attorney (SPA) duly authenticated/consularized by the Philippine Consulate where said clients are located.
8. **ATTORNEYS-IN-FACT.** For attorneys-in-fact or agents, ensure that the SPA clearly specifies the agent and the scope of agent's authority. SPA must be duly notarized or consularized as case may be.

RECEIVED AND VALIDATED BY:

Acquired Assets Assistant

Acquired Assets Officer

Date _____

Special Assets Department
 Land Bank of the Philippines
 30th Floor, LANDBANK Plaza
 M.H. del Pilar cor. Dr. Quintos Sts.
 Malate, Manila

NEGOTIATED SALE OFFER LETTER

Gentlemen:

I would like to offer to buy through negotiated sale from the Land Bank of the Philippines the acquired property/ies described as follows:

Location:
Description:
Land/Floor Area:
Offered Price:

Mode Of Payment	
<i>Lump Sum (Cash)</i>	<i>Installment Basis</i>
_____ % of the Offered Price (at least 10%) _____ % balance payable as follows: Within _____ days from date of Notice of Approval of Sale.	_____ % of the Offered Price (at least 10%) _____ % additional payment payable within _____ days after approval. _____ % balance payable monthly, as follows: Term: _____ no. of years Interest: _____ % per annum
Note: A penalty of 2% per month shall be charged for late payment/s	

The payment for the required _____ % of the Offered Price is enclosed with the following details: Amount: _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check Check No.: _____ Bank / Branch: _____ Date: _____
--

LBP's receipt of *at least 10% of the Offered Price* described above does not constitute acceptance of my [the offeror's] offer. It shall be applied as partial payment in case my offer is approved. *The amount shall be forfeited* in favor of LBP if the sale is approved but not consummated due to negligence, failure to submit the necessary documents, or any act or omission on my part that may be construed by Land Bank as arising from my own fault. However, I agree that *the same shall be returned to me without interest* in case my offer is disapproved by Land Bank or not recommended for approval for whatever reason. It is also understood that I have inspected the property described above to ascertain the actual condition/status of the same and that I am acquiring the same on an "AS-IS-WHERE-IS" basis. I further agree that Land Bank reserves the right to accept or reject offers and I likewise hold Land Bank free and harmless from any liability arising hereof.

Very truly yours,

BUYER/s:**BROKER**_____
Name/s and Signature/s_____
Address_____
Telephone No._____
TIN:_____
Signature over printed name



CLIENT INFORMATION AND SPECIMEN SIGNATURE CARD (CISSC)
(DEPOSIT ACCOUNT)

REVISED NOVEMBER 2015
**INDIVIDUAL
CUSTOMER**

Customer No.

Type Code: Personal

Sub-type code:

☐ 10 - Individual

☐ 20 - Sole Proprietorship

PERSONAL INFORMATION

First Name (include name suffix: Sr., Jr., III, IV)

Middle Name

Last Name

Nickname

Nationality

Present Address (No./Street, Subd., Brgy./Dist./Municipality/City/Province)

Country

ZIP Code

Permanent Address (No./Street, Subd., Brgy./Dist./Municipality/City/Province)

Country

ZIP Code

U.S. Address (if applicable)

ZIP Code

Tax Identification Number (TIN)

Residential Phone (Area Code + Tel. No.)

Mobile Phone No.

U.S. Social Service Number (SSN) or Individual Tax Identification Number (ITIN), if applicable

U.S. Phone (Area Code + Tel. No.)

Profession

e-Mail Address

Length of Stay in the US

Current Yr _____ Last Yr _____ 2 Yrs Prior _____

Valid IDs Presented :

SSS No. _____

Passport No. _____

ACR No. (For Foreign Nationals) _____

Company ID No. _____

GSIS No. _____

Voter's ID No. _____

Others _____

Source of Funds:

☐ 30 - Business

☐ 60 - Other Remittance

Gender: ☐ M ☐ F

Civil Status: ☐ Separated

☐ 10 - Salary/Honoraria

☐ 40 - Pension

☐ 99 - Others (pls. specify) _____

Nationality

☐ Single

☐ Widowed

☐ 20 - Interest/Commission

☐ 50 - Overseas Filipino Remittance

☐ Married

☐ Divorced

Date of Birth (mmddyyyy)

Place of Birth

No. of Children

Mother's Maiden Name (First Name, Middle Name, Last Name)

SPOUSE'S INFORMATION

Name (First Name, Middle Name, Last Name)

Profession

Date of Birth

Tax Identification Number (TIN)

BENEFICIAL OWNER'S INFORMATION

Name (First Name, Middle Name, Last Name)

Customer No.

Date of Birth (mmddyyyy)

Place of Birth

Nature of Work

Source of Funds

Present Address (No./Street, Subd., Brgy./Dist./Municipality/City/Province)

ZIP Code

Country

FINANCIAL INFORMATION OF DEPOSITOR

Employer's Name

Employment Start Date

Job Title

Employer's Address (No./Street, Subd., Brgy./Dist./Municipality/City/Province)

ZIP Code

Occupation

☐ 1 - Employed

☐ 3 - Overseas Filipino Worker

Monthly Gross Income

☐ 1 - Php 30,000.00 & Below

☐ 3 - Php 50,000.01 - 100,000

☐ 5 - Over Php 500,000

☐ 2 - Self-employed

☐ 4 - Retired

☐ 5 - Others (pls. specify) _____

☐ 2 - Php 30,000.01 - 50,000

☐ 4 - Php 100,000.01 - 500,000

SPECIMEN SIGNATURE CARD

Account Name

Account Type

Account Number :

Initial Deposit

☐ Cash

☐ Check

Date Opened

Date Updated

PLEASE ATTACH
ID PICTURE

1 _____

2 _____

3 _____

Left Thumbmark

Right Thumbmark

(This portion shall be accomplished if client is unable to write.)



(continuation) FINANCIAL INFORMATION OF DEPOSITOR				
FOR SOLE PROPRIETORSHIP ONLY				
Business Name:				
Business Address			ZIP Code	Country
Business Phone (Area Code + Tel. No.)	Date Established (mm/dd/yyyy)	Years in Business	No. of Employees	
Place of Registration	Registration Date	Registration Number	Registering Agency (CDA, DTI, SEC, etc.)	
NATURE OF WORK/BUSINESS/ECONOMIC ACTIVITY				
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input type="checkbox"/> 0100 - Agriculture, Hunting and Forestry <input type="checkbox"/> 0200 - Fishing <input type="checkbox"/> 0300 - Mining and Quarrying <input type="checkbox"/> 0400 - Manufacturing <input type="checkbox"/> 0500 - Electricity, Gas and Water Supply <input type="checkbox"/> 0600 - Construction <input type="checkbox"/> 0700 - Wholesale and Retail Trade </div> <div style="width: 33%;"> <input type="checkbox"/> 0800 - Hotel and Restaurant <input type="checkbox"/> 0900 - Transportation <input type="checkbox"/> 1000 - Financial Intermediation <input type="checkbox"/> 1100 - Real Estate <input type="checkbox"/> 1200 - Renting and Business Activities <input type="checkbox"/> 1400 - Education <input type="checkbox"/> 1500 - Health and Social Work </div> <div style="width: 33%;"> <input type="checkbox"/> 1600 - Other Community, Social and Personal Services (e.g., Individual Service Provider) <input type="checkbox"/> 1700 - Private Household with Employed Persons <input type="checkbox"/> 1204 - Jewelry/ Precious Stones Dealer <input type="checkbox"/> 1005 - Foreign Exchange Dealer/Money Changer/Remittance Agent <input type="checkbox"/> 0021 - Others (pls. specify) _____ </div> </div>				
List of companies where depositor is a Director/Officer/Stockholder				
Existing Accounts With LBP <input type="checkbox"/> SA/ATM <input type="checkbox"/> Trust <input type="checkbox"/> Treasury <input type="checkbox"/> CA/ATM <input type="checkbox"/> Loans <input type="checkbox"/> Credit Card <input type="checkbox"/> TD <input type="checkbox"/> Trade		Existing Accounts With Other Banks Bank / Branch name _____ Type of Account _____ _____ _____		
PHONE ACCESS & iAccess ENROLLMENT				
Request for enrollment <input type="checkbox"/> iAccess <input type="checkbox"/> Phone Access <input type="checkbox"/> Others (pls. specify)				
Account Number		Account Type*	Fund Transfer**	
		Individual (I)/Joint (J)	Own	3rd Party
<div style="border: 1px solid black; padding: 2px;"> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> </div>				
<small>* Indicate (I) if individual account or (J) if joint account. For joint "and" account, only inquiry services can be enrolled. ** Put a check (✓) mark to whichever is applicable.</small>				
Bills Payment (Limited to individual/joint "or" accounts) Note: All enrolled deposit accounts will be activated for Bills Payment feature				
Merchant/Agency		Subscriber's Name		Reference Number*
<small>*For verification of your reference number, please present your latest Billing Statement from your merchant. Note: Please indicate "NOT APPLICABLE" or "NA" for fields with no applicable data and "Nothing Follows" immediately after the last item.</small>				
I certify that the above information are true and correct.				
<div style="display: flex; justify-content: space-between;"> <div>_____</div> <div style="border: 1px solid black; border-radius: 50%; padding: 5px; text-align: center;">SIGNATURE VERIFIED</div> </div> Signature Over Printed Name				
FOR BANK USE ONLY				
<small>Please put check (✓) and indicate details, whenever applicable</small> BE [] RBE [] Name of BE _____ PC [] WPR [] Name of PC _____ OFC [] Match [] No Match FATF [] Match [] No Match CPRR Points [] LR [] NR [] HR []			Validated/Assessed/Authenticated and Opened By: _____ Signature Over Printed Name _____ DATE: _____	
			Approved By: _____ Signature Over Printed Name _____ DATE: _____	
ATM CARD/PASSBOOK/CHECKBOOK ACKNOWLEDGEMENT SECTION				
APPROVED FOR RELEASE:		RELEASED BY:		RECEIVED BY:
_____		_____		_____
Customer Associate/Date/Time		Immediate Supervisor/Alternate		Signature over printed name
PIN MAILER ACKNOWLEDGEMENT SECTION				
RELEASED BY:		RECEIVED BY:		
_____		_____		
Branch Head/Alternate/Date/Time		Signature over printed name		





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Address : _____
Contact No.: _____

KYC Questionnaire:

1. I came to know about the property through:

- ☐ LBP Website ☐ Online Partners (e.g. Lamudi, Repo.ph, PropertyForum) ☐ Social Media (Facebook)
☐ Referred by Agent/Referror/Broker ☐ Newsprint, poster, tarpaulin ☐ Housing Fair
☐ Referred by Branch _____
(Branch Name) By: _____ (Name of Branch Employee)
☐ Referred by LBP Employee _____
(Name of Employee) Contact Number _____

2. Purpose of Purchase: _____

3. Source of fund for this Purchase: _____

4. First Time buyer with LBP? ☐ Yes ☐ No _____
If NO, please give details of previous property purchased: _____

5. Are you related to an LBP Employee? ☐ Yes ☐ No _____
If YES, Name of LBP Employee/Position _____ LBP Branch/Department _____ Relationship _____

6. Is the Buyer, including immediate family members (spouse, parents, siblings, children and spouse's parents or siblings) holding position in the Government, elected or not? ☐ Yes ☐ No _____
If YES, Name of Immediate Family Member and Position _____ Government Agency _____ Relationship _____

7. Is Buyer engaged with Money Service Business (MSB)? ☐ Yes ☐ No If YES, Check Type ☐ Foreign Exchange Dealer (FXD) ☐ Money Changer (MC) ☐ Remittance Agent

8. LBP Credit Card Holder? ☐ Yes ☐ No

9. Filipino Citizen? ☐ Yes ☐ No _____
If No, please specify citizenship. _____

Related Party Questionnaire (PRINCIPAL):

1. Are you an employee, a director, or officer of LBP and/or its subsidiaries/ affiliated companies? ☐ Yes ☐ No

If YES, please specify the following:

Department/Unit: _____ ☐ Director ☐ Officer ☐ Employee
Department/Unit: _____ ☐ Director ☐ Officer ☐ Employee
Department/Unit: _____ ☐ Director ☐ Officer ☐ Employee

2. Do you have any relatives working in LBP and/or affiliated companies/ subsidiaries within the second degree of consanguinity or affinity?
(e.g. spouse, parent/parent-in-law, child/son, daughter-in-law, brother/brother-in-law, sister/sister-in-law, grandparent/grandparent-in-law, grandchild/grandchild-in-law)

If YES, please specify the following:

Name of Relative	Relationship	Company Name
Last Name, First Name Middle Name	_____	_____
Last Name, First Name Middle Name	_____	_____
Last Name, First Name Middle Name	_____	_____

CERTIFICATION

I hereby certify that the information provided above is true and correct, to the best of my knowledge and belief.

Signature Over Printed Name

UNDERTAKING

- The buyer hereby certifies that the information contained herein is/are true and correct and the signatures indicated herein are genuine.
- The buyer hereby authorizes LBP and its authorized representative/s to conduct credit verification.
- The buyer hereby waives confidentiality of client information including but not limited to 1405 (Secrecy of Bank Deposit Act), 6426 (Foreign Currency deposit Act), 10173 (Data Privacy Act of 2012) and Sec 55.1b of Republic Act No. 8791 (General Banking Law) and the law relating to the secrecy of Bank deposits for purposes of Credit Checking.

SIGNATURES OF BUYER/S

Principal Buyer	Conforme of Spouse	Second Buyer	Conforme of Spouse	A.I.F. Per SPA
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