



Republic of the Philippines

City Government of Baguio

2020 BAGUIO REVITALIZATION ACTIONS FOR A VIBRANT ECONOMY – ECONOMIC STIMULUS PACKAGE (BRAVE – ESP)

Application Form

Application Date ___/___/___ (mm/dd/yyyy)

2019 TOTAL GROSS RECEIPTS: PHP _____

BUSINESS CLASSIFICATION	REQUESTED LOAN AMOUNT	REQUESTED LOAN TERM (no. of months)
Micro Enterprise Loanable Amount: Php 10,000 - Php 50,000.00	Php _____	Loan Term: _____ months Grace Period: _____ months
Small Enterprise Loanable Amount: Php 10,000 - Php 100,000.00	Php _____	Loan Term: _____ months Grace Period: _____ months

Payment Mode: **MONTHLY** (first payment after the grace period)

Loan Purpose: _____ Working Capital for restarting the business.
_____ Temporarily dropdown of profit.

1. Have you availed of a COVID Stimulus Package from another Government Agency:

Yes No

If Yes, from what Government Agency: _____

Amount: Php _____ Term: _____ Current Outstanding Bal. _____

2. Have you availed of financial assistance from other sources (banks, lending institutions, etc):

Yes No

If Yes, from what Organization/Corporation: _____

Amount: Php _____ Term: _____ Current Outstanding Bal. _____

PERSONAL INFORMATION

Name: _____

Gender: Male Female Civil Status: Single Married Widowed

Date of Birth: ___/___/___ (mm/dd/yy) Place of Birth: _____

Citizenship: _____ TIN: _____

SPOUSE INFORMATION

Name: _____

Gender: Male Female Date of Birth: ___/___/___ (mm/dd/yy)

Place of Birth: _____ Citizenship: _____

TIN: _____ SSS/GSIS: _____

BUSINESS INFORMATION

Business Name: _____

Nature of Business/Line of Business: _____



Year Established: _____ Total No. of Employees: _____
Total No. of Employees with Statutory Benefits: _____
Business Contact Number: _____
Mobile Landline Others

ADDRESS INFORMATION

Business Address: _____
No. Building/Street Barangay City
Ownership: Owned Rented
If Renting, Name of Lessor: _____ Occupied since: (year) _____
Term of Contract: _____ Contact No.: _____
Home Address: _____
No. Building/Street Barangay City
Ownership: Owned Rented
If Renting, Name of Lessor: _____ Occupied since: (year) _____
Term of Contract: _____ Contact No.: _____

IDENTIFICATION DOCUMENT INFORMATION

Government Issued I.D. presented: _____ I.D. Number: _____
Date Issued: _____ Issued by: _____

CONTACT DETAILS

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

FINANCIAL INFORMATION

- Gross Receipts:
Monthly Gross Sales from Businesses: _____
- Business Expenses:
Monthly Operating Expenses: _____

I hereby certify that information reflected herein is true and correct to the best of my knowledge and that any information disclosed herewith may be used by the City Government of Baguio for the processing of my loan application. I also authorize the City Government of Baguio to verify and investigate any information provided herewith for the processing of my application. I understand that any misrepresentation or falsity in this document may be used as grounds for criminal charges against the undersigned.

Signature over Printed Name

Date

**Do not leave any blanks, write N/A if not applicable*