

APPLICATION FORM GRABTABV3.0 PROGRAM

Reference No: _____
(For Head Office Only)

Fill out all the required information. Do not leave an item blank.				
1	Date of Application: (MM/DD/YYYY)			
2	Distribution Channel:	<input type="checkbox"/> Agency	<input type="checkbox"/> Bancassurance	
3	Name of Intermediary: (Last Name, First Name)			
4	Intermediary Code:			
5	Name of Immediate Leader: (Last Name, First Name)			
6	Name of Regional Business Manager: (Last Name, First Name)			
7	Chosen Model of Tablet: (Choose only one and mark (x) the box)	<input type="checkbox"/> Galaxy Tab S7+	<input type="checkbox"/> Galaxy Tab S6 Lite	
		<input type="checkbox"/> Galaxy Tab S7	<input type="checkbox"/> Galaxy Tab A Series (A7, A10.1)	
		<input type="checkbox"/> Galaxy Tab S6		
LOAN PLAN*				
Choose the loan amount and mark (x) the box of your preferred loan scheme (6, 9, or 12 months).				
8	LOAN AMOUNT	6 Months to Pay	9 Months to Pay	12 Months to Pay
	PHP 15,000	<input type="checkbox"/> PHP 2,550/ Month (Total Loan: PHP 15,300)	<input type="checkbox"/> PHP 1,710/ Month (Total Loan: PHP 15,390)	<input type="checkbox"/> PHP 1,290/ Month (Total Loan: PHP 15,480)
	PHP 25,000	<input type="checkbox"/> PHP 4,250/ Month (Total Loan: PHP 25,500)	<input type="checkbox"/> PHP 2,850/ Month (Total Loan: PHP 25,650)	<input type="checkbox"/> PHP 2,150/ Month (Total Loan: PHP 25,800)
	PHP 50,000	<input type="checkbox"/> PHP 8,500/ Month (Total Loan: PHP 51,000)	<input type="checkbox"/> PHP 5,700/ Month (Total Loan: PHP 51,300)	<input type="checkbox"/> PHP 4,300/ Month (Total Loan: PHP 51,600)

*For every month of default, a fixed penalty of Php 20 (15k loan), Php 30 (25k loan) and Php 60 (50k loan) will be charged with its corresponding loan amount.

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TERMS & CONDITIONS

1. I am availing of the GrabTab loan for the sole purpose of purchasing a tablet among the acceptable models provided by Allianz PNB Life.
2. Should I wish to purchase a recommended tablet that costs more than the maximum loan amount, I am willing to pay for the excess.
3. I agree to submit the Official Receipt (OR) which contains the details of: 1) OR under my complete name, 2) Brand and Unit Model, 3) Total amount paid, and 4) Date of purchase.
4. I agree to provide a copy of the Official Receipt should Allianz PNB Life ask for proof of purchase for audit purposes.
5. I agree that for every month of default, a fixed penalty of Php 20.00 shall be charged for Php 15k loan, Php 30.00 for Php 25K loan, and Php 60.00 for Php 50K loan.
6. I expressly authorize Allianz PNB Life to deduct the monthly payable amount as indicated above from my earned commissions as reflected in my monthly Statement of Account.
7. I understand that it is my responsibility to pay for the GrabTab loan within the chosen loan plan. Should I be unable to pay for the outstanding balance three (3) months after the maturity of the loan, the outstanding amount will be deducted from my co-maker. In the event that my co-maker is no longer connected to Allianz PNB Life for any reason while my loan is pending, I shall ensure that an equally acceptable co-maker will take his or her place.
8. I acknowledge and agree that Allianz PNB Life will not shoulder any monthly data charges should I purchase a data plan along with the tablet.
9. If in case the tablet gets damaged or is lost then I will still continue to pay for the loan.
10. In case of resignation, I understand that I will not be cleared from Allianz PNB Life until I have fully paid my GrabTab loan.

BY SUBMITTING THIS FORM, I CERTIFY THAT ALL THE ABOVE INFORMATION IS ACCURATE, AND I AGREE TO THE TERMS AND CONDITIONS OF THIS SERVICE.

(Name of Applicant)

(Date)

ATTESTATION OF CO-MAKER FOR THE GRABTAB LOAN OF INTERMEDIARY

I, _____, have discussed with _____,
(Name of Applicant)

and attest and certify that:

1. The Applicant will use the loan for the sole purpose of purchasing the Tablet to facilitate the conduct of their Allianz PNB Life business needs.
2. Should the Applicant be unable to pay for his/her outstanding balance three (3) months after the maturity of the loan or his /her separation from Allianz PNB Life, whichever is earlier, I authorize Allianz PNB Life to deduct the outstanding balance from my Payout Account.

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BRING YOUR OWN DEVICE UNDERTAKING

I _____, a licensed agent of Allianz PNB Life Insurance, Inc. (the "Company") understand and accept the following terms and conditions:

1. I understand that the Company will provide me with Digital tools (Digital Tools) including but not limited to Allianz Journey, designed to facilitate ease of solicitation or procurement of applications of insurance and servicing the needs of my clients.
2. I agree to register my device with the company's IT Department and that while the Digital Tools will be installed in my own device, ownership of the Digital Tools and all information contained therein shall remain solely with the Company.
3. As a user of Digital Tools, I undertake to comply with applicable regulations, particularly Data Privacy laws, and will treat the protection of personal information contained in the Digital Tools with utmost importance.
4. As a user of Digital Tools, it is my duty to report to **protectprivacy@allianzpnblife.ph** and **dsu@allianzpnblife.ph** within **12 hours** from my reasonable belief that the Digital Tools and any information contained therein may be compromised.
5. I will give my full cooperation in any investigation or assessment of a potential or actual data breach.
6. My access to Digital Tools shall be at the sole discretion of the Company.

I hereby certify that I will faithfully comply with the aforesaid guidelines and procedures set by the Company and any violation of the above-mentioned conditions may be a ground for the termination of my Contract with the Company.

(Name of Intermediary)

(Date)

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FOR HEAD OFFICE USE ONLY			
	Reviewer/Approver	Date	Remark/s
RBM			
Distribution Support Unit	<input type="checkbox"/> Anna Luisa Tiosen <input type="checkbox"/> Chrizza Trinidad <input type="checkbox"/> _____		
Distribution HR & Compensation	<input type="checkbox"/> Quincy Gelacio <input type="checkbox"/> Maricel Sinaguinan <input type="checkbox"/> Angelo Ape <input type="checkbox"/> _____		