



**BAGUIO REVITALIZATION ACTIONS FOR A VIBRANT ECONOMY – ECONOMIC
 STIMULUS PACKAGE (BRAVE – ESP)
 Application Form**

Application Date ___/___/___ (mm/dd/yyyy)		
TOTAL GROSS RECEIPTS (preceding year): PHP _____		
BUSINESS CLASSIFICATION	REQUESTED LOAN AMOUNT	REQUESTED LOAN TERM (no. of months)
Micro and Small Enterprise Loanable Amount: Php 10,000 - Php 200,000.00	Php _____	Loan Term: _____ months Grace Period: _____ months
Payment Mode: MONTHLY (first payment after the grace period)		
Loan Purpose: <input type="checkbox"/> Working Capital for restarting the business. <input type="checkbox"/> Temporarily dropdown of profit.		
1. Have you availed of the BRAVE-ESP Loan Package: <input type="checkbox"/> Yes <input type="checkbox"/> No Amount: Php _____ Term: _____ Current Outstanding Bal. _____ 2. Have you availed of a COVID Stimulus Package from another Government Agency: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, from what Government Agency: _____ Amount: Php _____ Term: _____ Current Outstanding Bal. _____ 3. Have you availed of financial assistance from other sources (banks, lending institutions,etc): <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, from what Organization/Corporation: _____ Amount: Php _____ Term: _____ Current Outstanding Bal. _____		
PERSONAL INFORMATION		
Name: _____ <small style="margin-left: 100px;">Last</small> <small style="margin-left: 150px;">First</small> <small style="margin-left: 100px;">Middle (Complete)</small>		
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Civil Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed		
Date of Birth: ___/___/___ (mm/dd/yy) Place of Birth: _____		
Citizenship: _____ TIN: _____		
SPOUSE INFORMATION		
Name: _____ <small style="margin-left: 100px;">Last</small> <small style="margin-left: 150px;">First</small> <small style="margin-left: 100px;">Middle (Complete)</small>		
Gender: <input type="checkbox"/> Male <input type="checkbox"/> 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

- 1. Gross Receipts:
Monthly Gross Sales from Businesses: _____

- 2. 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*