

CUSTOMER REGISTRATION FORM

(For TRADE ACCOUNT)

| Reminders: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|----------|------|------|---------------------|--------------------|-------|------|-------|------------------------|------------------|-----|---------|------------------|-----|------|-----------------|------|-----|---|--|---|---|---|--|---|---|----------|
| 1. Asterisks (*) m | | | | - | | | | | | | | | | | | | | | | | | | | | | | | |
| Accomplish one (1) copy per Customer. Submit accomplished Customer Registration Form to PPA - ICTD (Fax # 02-3019452) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Attach required | | | _ | | | | | | | | | | | | | EC | for | m) | | | | | | | | | | |
| * Action: C] [C] Create / [R] Revise / [D] Delete Customer Code : (System Generated) | | | | | | | | | ĺ | | | 1 | Ì | | | | | | | | | | | | | | | |
| | | | | | To | be | fille | ed o | out | by (| Cus | tor | mer | • | | | | | | | | | | | | | | _ |
| Customer Details | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * Customer Name: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * Short Name: | | | | 1 1 | | | | * C | TI R | egis | trati | on | Nur | nbe | r: | | | | Ì | ĺ | ĺ | 1 | | | Ì | | | |
| | | | | | | 1 | | l | ı | 1 | 1 | ı | ı | ı | I | | L I | | | | <u> </u> | 1 | | | <u> </u> | 1 | 1 | <u> </u> |
| Primary / Principal Contractor | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | |
| * Address: | | | | Ì | | | | | | | | | | | | | | | | | | | | | | | | ĺ |
| | | | | | İ | | | | | | | | | | ĺ | | | | | | | | | | | 1 | | _ |
| | 1 1 | | | | | | | | I | 1 | | 1 | <u></u> | 1 | | 1 | 1 | ı | I | ı | 1 | İ | 1 | ı | I | 1 | | |
| Postal/Zip Code: | * TIN: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Communications | 1 1 | i | ı | | | ı | 1 | ı | ı | | 1 | ı | | | | 1 | | 1 | 1 | | | 1 | | ı | | 1 | 1 | 1 |
| *Contact Name: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Contact Position: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Telephone 1: | | | | | | | | | | | Fa | x N | lo. : | | | | l | ĺ | ĺ | | ĺ | ĺ | | ĺ | | | | |
| Telephone 2: | | | | | | | | | | | E- | mai | il: | | | | _ | | | | | | | | | | | |
| Prepared by: Date: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| To be filled out by PPA Personnel | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *PMO Office : | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Customer Group / Profile Class Payment Type: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Check group that apply | • | | | | | | | | | | | Cas | sh | | | | | | | | | | | | | | | |
| ☐ Cargo Handling | ☐ Ancillary Services | | | | | | | | | | | | | ☐ Credit with RF | | | | | | | | | | | | | | |
| ☐ Shipping lines | Choose type of Ancillary Service Remarks: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ☐ Gov't Office | | | |] La | und | erin | g | | [| ☐ T | rans | spo | rt/T | rucl | kin | g | | | | | | | | | | | | |
| ☐ Employee | ☐ Cargo Surveying | | | | ☐ Lighterage/Bargng | | | | [| ☐ Vessel Maint./Repair | | | | | | | | | | | | | | | | | | |
| Lessee | ☐ Chandling | | | |] Pa | rkin | g/G | arag | е | _ | ☐ Waste Disposal | | | | | | | | | | | | | | | | | |
| ☐ Utility User | ☐ Cleaning Service | | | | ☐ Reproduction Svc | | | | [| ☐ Water Supply | | | | | _ | | | | | | | | | | | | | |
| STU | | nmunic | | | | ☐ Security Service | | | | | ☐ Water Taxi | | | | | 1 | | | | | | | | | | | | |
| Others | | tainer l | | ir | [| | | /Sto | | | [| _ W | /eig | hbr | ge/ | Truc | ck (| Sca | ıle | 1 | | | | | | | | |
| Specify: | ☐ Fum | igation | 1 | | | J To | win | g/Tu | ıggir | ng | | | | | | | | | | | | | | | | | | |
| | | _ | | | | /- | | _ | | | | | | | | | | | | | | | | | | | | |
| Prepared By/Date | : | ed b | y/Da | ate | | | | | En | cod | ed | Ву: | | | | | Checked by/Date | | | | | | | | | | | |

General Instructions Example:

| ndicate the Application ty | /pe/action | by marking | the ap | ppropriate i | lette |
|----------------------------|------------|------------|--------|--------------|-------|
| on the box provided. | | | | | |

| | Action: [C] Create / [R] Revise / [D] Delete | | | | | | | | | | | | | | | | | |
|--|--|-----------|-----------|---------|-------|------|----------------|---------|----------|-----------------|-----|------|------|-----|----------|---|---|---|
| To be filled out by Customer | | | | | | | | | | | | | | | | | | |
| 1. Indicate the Customer Name in the boxes provided. | | | | | | | | | | | | | | | | | | |
| Ex | Example: Customer Name: | | | | | | | | | | | | | | | | | |
| 0 | С | L | | L | I | М | I | Т | E | D | | | | | | | | |
| 2. | Indic | ate t | he (| Custo | omer | Sho | ort N | ame | in tl | ne bo | xes | prov | /ide | d. | i | i | | i |
| Ex | ampl | e: S | hort | Nan | ne: | | 0 | С | L | | | | | | | | | |
| 3. | 3. Indicate the Customer DTI Registration No. in the boxes provided. | | | | | | | | | | | | | | | | | |
| Example: | | | | | | | | | | | | | | | | | | |
| 4. | 4. Indicate the Customer Address in the boxes provided. | | | | | | | | | | | | | | | | | |
| Ex S | ampl U | e: A P | ddre E | ess: | | Т | ΙE | R | М | Li | N | A | lμ | ĺ | Ì | ĺ | | l |
| P | ı | E | R | 1 | 5 | Ė | _ | K | IVI | ' | IN | ^ | - | , | | _ | | - |
| | l . | | | 1 | 1 | 1 | | 1 | | | 1 | 1 | | | 1 | | | |
| S | 0 | U | Т | Н | | Н | Α | 1 | 1 | 1 | R | , | ^ | F |) (| 0 | R | _ |
| Т | | Α | R | E | Α | , | | М | Α | N | I | L | Α | | | | | |
| | | | | | | | | | | stal C / add | | | | oxe | s | | | |
| E | xam | ple: | Zip/ | Post | al Co | ode | | | 1 | 0 | | 1 | 3 | | | | | |
| 6. | Cour | ntry v | /alu | e is p | ore-s | uppl | ied. | | | | | | | | | | | |
| Ex | ampl | e: C | Cour | ntry: | ا۔ | | _ | NL :::. | • | | | | | | | | | |
| | | | | | P | РΗ | _ | hili | opir | ies | | | | | | | • | |
| 7. | 7. Indicate the Customer TIN in the boxes provided. | | | | | | | | | | | | | | | | | |
| Ex | ampl | e: T | IN | | 9 | 1 | 2 | 3 | 5 | 7 | 8 | 6 0 | | 8 6 | 6 0 | 0 | | |
| Indicate the Customer Contact Person's Name, Contact Position, Contact Number/s, Fax No and E-mail Address in the boxes/line provided. | | | | | | | | | | | | | | | | | | |
| | ampl ntac | | - 1 | N | ĺ | D | l _F | _ | ı | ΔΙ | ĺ | c l | R | Lι | ן נ | z | Î | ĺ |
| | | 1. | <u> </u> | ••• | | | | | <u> </u> | | | | | | <u> </u> | _ | | _ |
| Co A | ntac G | t Pos | | n: N | Т | | | | | | | | | | | | | |
| Te | lepho | one ' | 1: | | | 0 | 2 | 3 | 0 | 1 | 9 | 2 | 9 | 1 | | | | |
| Te | lepho | one 2 | 2: | | | 0 | 9 | 1 | 7 | 4 | 3 | 2 | 5 | 5 | 6 | 6 | | |
| Fa | x No | .: | | | | 0 | 2 | 3 | 0 | 1 | 9 | 2 | 9 | 2 | | | | |

E-mail: _ocl@yahoo.com

9. Indicate Name of the Person who accomplished the form & affix signature and date when the form was accomplished.

| _ | | |
|------|---|-------------|
| Exam | n | ا ما |
| | u | IE. |

Prepared by: Juan De la Cruz Date: 01/16/2004

For PPA Accounting Use Only

1. Indicate the Office name and Customer Group with respective descriptions in the boxes/lines provided.

Example:

PPA Office: **PMO-North Harbor**

Cargo Handling ☐ Shipping Lines ☐ Gov't Office

2. Indicate the ATC Code (Choices for EWT and CWT are the following)

ATC Code EWT

WC100 - 5% - Rentals : Real/personal properties, poles, Satellites and Transmission facilities, billboards used in business which the payor or obligator used in business has not taken or is not taking title or in which has no equity WC157 - 2% - Payments made by Government Offices on Local Purchase of Goods and services from Local/resident

WC160 - 2% - Income payments made by top 10,000 private corporations to their local/resident suppliers of services

ATC Code CWT

WC120 - 2% - Prime Contractors/sub-contractors WC157 - 2% - Payments made by Government Offices on Local Purchase of Goods and services from Local/resident suppliers

WC160 - 2% - Income payments made by top 10,000 private corporations to their local/resident suppliers of services WV020 - 5% - VAT withholding on Purchase of Services

3. Account Category is pre-supplied with default value to "Cash".

⊠ Cash Example:

4. Payment Term Code value is pre-supplied with default value to 'Cash".

Example: Payment Terms: C0000 - Cash

5. Currency Type value is pre-supplied with default value to" Php Peso

Example:

Currency Type: **Philippine Peso**

6. Indicate Names and Dates and affix respective signatures of the persons who provided the information, gave authority to encode, encoded the information and validated the accuracy.

Example:

| ALBorbon | RDPineda | SBVitales |
|--------------------|----------------------|-------------------|
| 01/19/04 | 01/19/04 | 01/20/4 |
| Prepared By/ Date: | Authorized By/ Date: | Encoded By/ Date: |

RDMedina 01/21/04 Checked By/ Date: