

 LANDBANK _____ Branch																					
ELECTRONIC PAYMENT PAYOR ENROLLMENT FORM																					
<input type="checkbox"/> New Enrollment <input type="checkbox"/> Update Information (Pls. specify _____) Enrollment Date _____																					
NAME _____																					
Payor Code																					
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 12.5%;"></td> </tr> </table>																					
ADDRESS _____	TEL. NO. _____																				
	FAX. NO. _____																				
ALTERNATE ADDRESS _____	ALTERNATE TEL. NO. _____																				
	MOBILE NO. _____																				
CONTACT PERSON/S	E-MAIL ADDRESS																				
1. _____	1. _____																				
2. _____	2. _____																				
TAX IDENTIFICATION NUMBER	ACCOUNT NUMBER TO BE ENROLLED																				
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<p>I/we hereby agree to the terms and conditions governing the ePayment Facility of LANDBANK.</p> <p>I/We declare under oath that this Electronic Payment Payor Enrollment Form has been accomplished by me/ourselves, and is true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines.</p> <p>I/We also authorize the Land Bank of the Philippines and/or its authorized representative to verify/validate the contents stated herein.</p>																					
_____ Signature Over Printed Name	_____ Signature Over Printed Name																				
This enrollment form shall be presented to LANDBANK upon opening/confirmation of client's account together with the duly accomplished Letter of Introduction.																					
Notes: 1. To be valid and binding, any erasures/alterations on the form must be duly countersigned by the client. 2. It is the responsibility of the client to inform the Bank should there be any changes in the ePayment Enrollment Form.																					
BANK USE ONLY																					
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