



SOUTHERN LEYTE ELECTRIC COOPERATIVE, INC.

(SOLECO)

Brgy. Soro-Soro, Maasin City, Southern Leyte 6600

Hotline Number (0917) 712 0947

APPLICATION FORM FOR COLLECTION AGENT

PLEASE PRINT LEGIBLY.

PRIVATE INDIVIDUAL

NAME	DATE OF BIRTH	PLACE OF BIRTH	
	AGE	SEX	BLOOD TYPE
PRESENT ADDRESS	CIVIL STATUS	NATIONALITY	RELIGION
PERMANENT ADDRESS	SPOUSE		
TIN	VALID ID	DATE OF ISSUE	PLACE OF ISSUE
SSS/GSIS NUMBER	OCCUPATION		
DEPOSITORY BANK/s	1 x 1 PHOTO	LEFT THUMBMARK	RIGHT THUMBMARK
I HEREBY CERTIFY THAT ALL INFORMATION SPECIFIED HEREIN ARE TRUE AND CORRECT			
SIGNATURE OVER PRINTED NAME			DATE FILED

COMPANY/COOPERATIVE

NAME	TYPE OF BUSINESS		
	NUMBER OF EMPLOYEES		
BUSINESS ADDRESS			
NAME OF REPRESENTATIVE		DESIGNATION	
TIN	SSS NUMBER	NO. OF YEARS IN BUSINESS	
REGISTRATION NO. (i.e., CDA, SEC, BSP)	VALID ID (Representative)	DATE OF ISSUE	PLACE OF ISSUE
DEPOSITORY BANK/s	1 x 1 PHOTO	LEFT THUMBMARK	RIGHT THUMBMARK
I HEREBY CERTIFY THAT ALL INFORMATION SPECIFIED HEREIN ARE TRUE AND CORRECT			
SIGNATURE OVER PRINTED NAME OF REPRESENTATIVE			DATE FILED