

GENERAL INFORMATION SHEET

		Date Accomplished/Signed:	
	COMPANY INFORMATION	ON CONTRACTOR OF THE PROPERTY	
Business Name:		Main Telephone No./Trunkline:	
		Fax No.:	
Business Industry: (Example: Banking)		Applicant's E-mail Address: Website:	
usiness Address:			
Billing Address (if different from Business Address)			
billing Address (if different from business Address)	•		
Finance Officer Name :	Finance Officer Contact Number:	Finance Officer's Email Address:	
Ownership shares:	□ Private □ Gove	ernment	
Tax Class:	AAPSI		
	□ VAT Exempt/ Zero-Rated □ With		
SEC Registration No.	AUTHORIZED SIGNATORY INFO	Company TIN:	
Name of Authorized Signatory/ Title:	E-mail Address:	Contact No.[Landline No. & Mobile No.]	
Name of Authorized Signatory/ Title.	L-IIIaii Addiess.	Contact No.[Landillie No. & Mobile No.]	
Attache copy of ID with this form:			
Company ID; ID No	Passport; ID No	Others; ID No	
Driver's License; ID No	- SSS/GSIS ID; ID No		
Puriness ontitus (Charles and	ORGANIZATION DATA - SINGLE PROPRIETORSHIP		
Business entity: (Check one)		1	
Date of Registration:	No. of Employee(s)/Staff:	Years in Operation:	
	FOR CORPORATION		
Key Officers (indicate the name and position/designation)	Contact No.	Email Address	
	FOR PARTNERSHIP - Name of	Partners	
Name and Position/Designation	Contact No.	Email Address	
	Contact No.	Liliali Audi ess	
1.			
2.			
3.			
3.	FOR SOLE PROPRIETORS	HIP	
	FOR SOLE PROPRIETORS		
Name of Owner :		Date of Birth:	
Name of Owner : SSS No.:	FOR SOLE PROPRIETORSI Personal TIN No.:		
Name of Owner :		Date of Birth:	
Name of Owner : SSS No.:		Date of Birth:	
Name of Owner : SSS No.: Home Address:	Personal TIN No.:	Date of Birth: Telephone No.: Email Address:	
Name of Owner : SSS No.: Home Address:	Personal TIN No.: Mobile No.:	Date of Birth: Telephone No.: Email Address:	
Name of Owner: SSS No.: Home Address: FAX No.: Employer/ Business Name:	Personal TIN No.: Mobile No.:	Date of Birth: Telephone No.: Email Address:	
Name of Owner: SSS No.: Home Address: FAX No.: Employer/ Business Name: Business Address:	Personal TIN No.: Mobile No.:	Date of Birth: Telephone No.: Email Address:	
Name of Owner: SSS No.: Home Address: FAX No.: Employer/ Business Name: Business Address: Business E-mail:	Personal TIN No.: Mobile No.: FOR COMPANY EMPLOYE	Date of Birth: Telephone No.: Email Address: ES	
Name of Owner: SSS No.: Home Address: FAX No.: Employer/ Business Name: Business Address:	Personal TIN No.: Mobile No.: FOR COMPANY EMPLOYE Earnings Per Annum:	Date of Birth: Telephone No.: Email Address:	
Name of Owner: SSS No.: Home Address: FAX No.: Employer/ Business Name: Business Address: Business E-mail: Position:	Personal TIN No.: Mobile No.: FOR COMPANY EMPLOYE	Date of Birth: Telephone No.: Email Address: ES	
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Copyright AKAMAI HOLDINGS INC. under the Philippine Law

TO BE FILLED OUT BY AKAMAI PERSONNEL				
	DOCUMENTARY REQUIREMENTS			
Please check compliance of do	cuments based on the type of business (Corporation, P	artnership, Sole Proprietorship)		
CORPORATION	PARTNERSHIP	SOLE PROPRIETORSHIP		
_				
☐ Accomplished Application Information Form	☐ Accomplished Application Information Form	☐ Accomplished Application Information Form		
☐ Business Permit/Mayor's Permit	☐ Business Permit/Mayor's Permit	☐ Business Permit/Mayor's Permit		
☐ Corporate Secretary Certificate or Notarized Board Resolution (indicating name of authorized signatory to sign/transact busines with BBI in behalf of the company)	□ Notarized Authority from the Partners (indicating the authorized signatory to sign/transact business with BBlin behalf of the partnership).	☐ Special Power of Attorney - if the document/conforme is not signed by the owner himself		
□ Photocopy of Valid ID with signature of authorized signatoryValid ID's: Passport, Driver's License, SSS, GSIS, TIN, PRC License (any 1)	☐ Photocopy of Valid ID with signature of authorized signatory Valid ID's: Passport, Driver's License, SSS, GSIS, TIN, PRC License (any 1)	Photocopy of Valid ID with signature of owner/proprietor. Valid ID's: Passport, Driver's License, SSS, GSIS, TIN, PRC License (any 1)		
ADDITIONAL REQUIREME	NTS FOR CORPORATION/PARTNERSHIP/SOLE PROPRI	ETORSHIP, IF APPLICABLE		
Letter of Intent address to Akamai Holdings Inc. an	d AH Construction Corporation			
□ Proof of Funds/ Latest Bank Statements/Proof of A	ssets			
Corporate Profile with Current and Past Project (Portfolio) with List of Equipment and Suppliers				
Credit Advice Letter from Bank (no more than 5 da address and site address)	ys) / Proof of Billing Address, any utility bills. (Only req	uired if billing address is different from the business		
address and site address)				
☐ Letter of Intent and Ready Willing and Able (RWA	letter)			
☐ Appointment papers and photocopy of ID of the authorized signatory				
☐ Certificate, licence or evidence of professional exp	perience			
CERTI	FICATION [To be filled out by Authorized Akamai Pers	onnel]		
TO FOLLOW DOCS	Deviation Request [please indicate justification]			
To be submitted on or before :	□ Bill Above □ Await Payment	 Deferment of Document submission 		
	□ Reduction of Advance Payment			
I hereby declare and certify that all the above information	on and documents submitted are validated true and correct. Li	kewise, I am vouching the authenticity and legal existence of		
above mentioned customer and that the person who signed th	e BCIF/Contract/Conforme/Service Application Form is the desi	gnated authorized signatory of the said business entity.		
Submitted/Vouched by:		Noted by:		
(Sales Personnel)		(Sales Head)		
PLEASE SIGN OVER PRINTED NAME		PLEASE SIGN OVER PRINTED NAME		
Date:		Date:		
SALES TEAM :				
CUSTOMER NAME:	_			
	FOR CREDIT USE ONLY			
Approved		Disapproved		
Amount of Advance Payment required:	Notes :			
Evaluated by:	Date:			
Credit Analyst (Sign	over printed name)			
, , ,	•	Copyright Akamai Holdings Inc under Philippine Law		