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1227 Makati City, Philippines  
Telephone + 63 (2) 8893-7024 to 28 • Fax + 63 (2) 8817-7852



**BROKERS ACCREDITATION FORM**

NAME : \_\_\_\_\_  
Last Name First Name Middle Name

B-DAY : \_\_\_\_\_ SEX : \_\_\_\_\_ CIVIL STATUS : \_\_\_\_\_

POSTAL ADDRESS : \_\_\_\_\_  
\_\_\_\_\_

**CONTACT DETAILS :**

RESIDENCE : \_\_\_\_\_ FAX : \_\_\_\_\_

OFFICE : \_\_\_\_\_ FAX : \_\_\_\_\_

MOBILE : \_\_\_\_\_

EMAIL ADDRESS : \_\_\_\_\_

COMPANY NAME : (If Applicable )

COMPANY ADDRESS : \_\_\_\_\_  
\_\_\_\_\_

|   |                       |                      |             |
|---|-----------------------|----------------------|-------------|
| PRC Registration No.: _____                   |                       | SEC. Reg. No.: _____ |             |
| Registration Date                             | : _____               | VAT No.              | : _____     |
| Expiry Date                                   | : _____               | TIN No.              | : _____     |
| a. Name of Secretary / Contact Person : _____ |                       |                      |             |
| b. Name/s of Accredited Sales Persons :       |                       |                      |             |
| Name  | PRC Accreditation No. | Reg. Date            | Expiry Date |
| 1. _____                                      | _____                 | _____                | _____       |
| 2. _____                                      | _____                 | _____                | _____       |
| 3. _____                                      | _____                 | _____                | _____       |
| 4. _____                                      | _____                 | _____                | _____       |
| 5. _____                                      | _____                 | _____                | _____       |
| 6. _____                                      | _____                 | _____                | _____       |
| 7. _____                                      | _____                 | _____                | _____       |
| 8. _____                                      | _____                 | _____                | _____       |
| 9. _____                                      | _____                 | _____                | _____       |
| 10. _____                                     | _____                 | _____                | _____       |
| 11. _____                                     | _____                 | _____                | _____       |

| Name                                      | PRC Accreditation No. | Reg. Date | Expiry Date |
|---|-----------------------|-----------|-------------|
| 12. _____                                 | _____                 | _____     | _____       |
| 13. _____                                 | _____                 | _____     | _____       |
| 14. _____                                 | _____                 | _____     | _____       |
| 15. _____                                 | _____                 | _____     | _____       |
| 16. _____                                 | _____                 | _____     | _____       |
| 17. _____                                 | _____                 | _____     | _____       |
| 18. _____                                 | _____                 | _____     | _____       |
| 19. _____                                 | _____                 | _____     | _____       |
| 20. _____                                 | _____                 | _____     | _____       |
| Broker Affiliation / Organization : _____ |                       |           |             |

EDUCATIONAL BACKGROUND

Name of School : \_\_\_\_\_

Year Started : \_\_\_\_\_ Year Ended : \_\_\_\_\_

Degree Earned : \_\_\_\_\_

Honors/ Distinctions/ Scholarship Received : \_\_\_\_\_

Name of School : \_\_\_\_\_

Year Started : \_\_\_\_\_ Year Ended : \_\_\_\_\_

Degree Earned : \_\_\_\_\_

Honors/ Distinctions/ Scholarship Received : \_\_\_\_\_

OTHER PROFESSIONAL LICENSES

Name of License : \_\_\_\_\_ Organization : \_\_\_\_\_

Year Taken : \_\_\_\_\_ License Number : \_\_\_\_\_

Name of License : \_\_\_\_\_ Organization : \_\_\_\_\_

Year Taken : \_\_\_\_\_ License Number : \_\_\_\_\_

\_\_\_\_\_

HOW DID YOU GET TO KNOW ACTIVE GROUP?

☐ Referral

Name of Person who referred : \_\_\_\_\_

☐ Website ([www.activegroup.com.ph](http://www.activegroup.com.ph) • [www.malarayat.com](http://www.malarayat.com))

If other website, Please specify : \_\_\_\_\_

☐ Advertisement

Where? \_\_\_\_\_

☐ Walk-in (office)

If on-site which project? \_\_\_\_\_

☐ Other

Please specify \_\_\_\_\_

WHAT PRODUCT TYPE/S ARE YOU COMFORTABLE OF SELLING?

- ☐ Residential Subdivisions
- ☐ Economic and Socialized Housing
- ☐ Resort and Leisure Developments

WHAT IS YOUR SELLING STRATEGY/IES ?

- ☐ Online Marketing

☐ Advertisements
- ☐ Referrals

☐ Saturation / Flying
- ☐ Others

HOW MANY UNITS CAN YOU COMMIT TO SELL ON YOUR FIRST YEAR OF SELLING WITH ACTIVE GROUP?

WHAT OTHER DEVELOPER/S DO YOU SELL?

HOW LONG HAVE YOU BEEN IN THE REAL ESTATE INDUSTRY?

I voluntarily give the company the right to make a thorough investigation of my past and release from all liabilities the parties supplying such information. The company may use these information in any manner it may wish. I consent to take all examinations the companies requires. Falsification and/or misrepresentation will be enough basis for termination.

Applicant's signature over printed name

Date

-----TO BE ACCOMPLISHED BY AUTHORIZED ACTIVE GROUP SALES STAFF-----

- Photocopy of PRC License

Photocopy of Business Name
- Photocopy of SEC Registration

Signed Brokers Information Sheet
- Photocopy of VAT Registration Certificate

Signed General Policies and Guidelines
- Photocopy of TIN Card

Three (3) 1x1 I.D. Picture

Sales Staff

Broker Coordinator