PSIPAGCC

APPLICATION FOR ☐ **Withdrawal via Coop-CHECK** ☐ **Transfer of Funds** ☐ **Others_____**

MEMBER INFORMATION

Membership Number	Member since
Account Name	Account Number
Address	Telephone No.
Purpose	Date of Birth
TIN No.	IDs presented

APPLICATION INFORMATION (Member's accountability)

Payee/Beneficiary Details	Receiving / Beneficiary Bank or Money Padala - Details
Payee/Beneficiary Name Account Number	Bank Name
Amount in words	Bank Branch & Address Account# _____
Amount in figures: Php_____ . __	Local courier/Remittance Center Name & Address
Charges for the account of ☐ Remitter ☐ Beneficiary	Remitter to Beneficiary Info

mode and breakdown of payment/withdrawal

☐ Cash ☐ Debit my Account #_____ ☐ Others _____

Face Amount	Php
Commission	
Postage/Cable	
Doc Stamps	
TOTAL	Php

Member's Signature over Printed Name
Date: _____

Authorized Representative Name and Signature

For Cooperative use only:

Processed: Checked/Verified: Approved:

Crediting of Funds/Proceeds In the absence of instructions to the contrary, PSIPAGCC shall, at its discretion, credit any and all funds it shall receive which purport to belong to any one or more of you, to your Joint Accounts. These may include the proceeds of loans/discounts which PSIPAGCC may make in favor of any one of you or for any of your Joint Accounts. **Withdrawals/Payment Orders/Account Closure** The signature of any one or all of you, as the case may be, shall operate your Joint Accounts. Each of you authorizes PSIPAGCC to transact withdrawals, checks or written payment orders or close or terminate your Joint Accounts on the basis of the signature of any one or all of you, or your respective attorneys-in-fact or legal representatives. These may include checks or credits in favor of the one who signed for these withdrawals or the closure or termination of your Joint Accounts. PSIPAGCC will process all these without inquiry or regard to disposition, even in cases where your Joint Accounts are overdrawn as a result of bank charges, and you agree to hold PSIPAGCC free and harmless from any liability arising therefrom. **Charges and Penalties** All of you will be jointly and severally liable for any overdrafts on your Joint Accounts, as well as other charges PSIPAGCC may impose in the course of the operation of the Joint Accounts. PSIPAGCC may, however, require the written consent or approval of any or all of you for fund transfers from your Joint Accounts to individual accounts any or all of you may have with PSIPAGCC. **Death of Co-Account Holder** Upon the death of a co-account holder, the funds in the Joint Accounts shall be subject to applicable Philippine laws, regulations, and orders of courts of competent jurisdiction and applicable terms and conditions. Written Notice of Death You must immediately furnish PSIPAGCC with an original or certified true copy of the certificate of death of the deceased co-account holder/s. The certificate of death shall be sufficient proof of such death, provided that PSIPAGCC reserves the right to require further proof or evidence as the circumstances may warrant.