PNB AUTO-DEBIT ARRAN	ADA Enrollment form			
PLEASE PRINT ALL INFORMATION			Date:	
ACCOUNTHOLDER/SUBSCRIBER INFORMATION				
NAME				
(LAST)		(FIRST)	(MIDDLE)	
ADDRESS				
	A	ACCOUNT INFORMATION		
ACCOUNT NUMBER (DEBIT ACCOUNT)	ACCOUNT NAME	MAINTAINING BRANCH	ACCOUNT TYPE	
			SAVINGS CHECKINGS	
		N/BILLER REFERENCE INFORMATION		
NAME OF BILLER	SUBSCRIBER/REFERENCE NUM	BER		
By signing here, I/we read, understood an	d agreed to the terms and co	onditions as cited below governing the Autor	matic Debit Arrangement.	
Authorized Signatory or Accountholder's Signature Over Printed Name Authorized Signatory or Accountholder's Signature Over Printed			Accountholder's Signature Over Printed Name	
FOR PNB-MAINTAINING BRANCH USE ONLY				
INSTITUTION'S FC CIF ID	PROCESSED BY/SIGNAT	TURE VERIFIED BY	APPROVED BY	
Terms and Conditions 1. The Auto Debit Arrangement (ADA) is an automated payment facility wherein the enrolled Accountholder/s are allowed to settle bills/premiums/service fees and charges / membership dues by authorizing PNB to charge the amount thereof against the current/savings account/s of the Accountholder/s maintained with PNB. 2. ADA requires the enrollment of the Accountholders' current/savings account/s with PNB as a condition for the settlement of bills/premiums/service fees and charges/membership dues through a direct debit facility. 3. The Bank is hereby authorized to automatically deduct from the enrolled account/s of the Accountholders the total amount of bills/premiums/service fees and charges/membership dues/statements of account/s as may be instructed by the Biller. 4. The Accountholder likewise hereby authorizes the Bank to disclose the Account Number (Debit Account) as specifically provided by the Accountholder herein to the authorized representative of its Biller, (Name of Company) from the disclosure of such Account Number (Debit Account) and hereby waives any claim or action the Accountholder may have pursuant to Republic Act (RA) No. 1405, the Secrecy of Bank Deposits Act, relative to such disclosure. 5. Any party may cancel or terminate the ADA privileges or this enrollment subject to a 30-day written notice to the other party prior to termination date without prejudice to the fees and charges payable to PNB. 6. The Accountholder shall hold PNB free and harmless from any claim, damage or expense of whatever nature in case PNB fails or refuses to pay bills/premiums/service fees/membership fees/statements of account and such other amounts due to the Biller in the event of force majeure.				
PNB AUTO-DEBIT ARRANGEMENT FORM				
PLEASE PRINT ALL INFORMATION Date:				
ACCOUNTHOLDER/SUBSCRIBER INFORMATION NAME				
IVAIVIL				
(LAST)		(FIRST)	(MIDDLE)	

PNB AUTO-DEBIT ARRAN	GEMENT FORM		ADA Enrollment form		
PLEASE PRINT ALL INFORMATION	Date:				
ACCOUNTHOLDER/SUBSCRIBER INFORMATION					
NAME					
(LAST)		(FIRST)	(MIDDLE)		
ADDRESS					
ACCOUNT INFORMATION					
ACCOUNT NUMBER (DEBIT ACCOUNT)	ACCOUNT NAME	MAINTAINING BRANCH	ACCOUNT TYPE		
			SAVINGS CHECKINGS		
INSTITUTION/BILLER REFERENCE INFORMATION					
NAME OF BILLER	SUBSCRIBER/REFERENCE NUMBER				
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FOR PNB-MAINTAINING BRANCH USE ONLY					
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Terms and Conditions					

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 2. ADA requires the enrollment of the Accountholders' current/savings account/s with PNB as a condition for the settlement of bills/premiums/service fees and
- charges/membership dues through a direct debit facility.
- 3. The Bank is hereby authorized to automatically deduct from the enrolled account/s of the Accountholders the total amount of bills/premiums/service fees and
- charges/membership dues/statements of account/s as may be instructed by the Biller.

 4. The Accountholder likewise hereby authorizes the Bank to disclose the Account Number (Debit Account) as specifically provided by the Accountholder herein to the authorized representative of its Biller. . The Accountholder shall hold the Bank free and harmless from any loss and damage resulting (Name of Company)

from the disclosure of such Account Number (Debit Account) and hereby waives any claim or action the Accountholder may have pursuant to Republic Act (RA) No. 1405, the Secrecy of Bank Deposits Act, relative to such disclosure.

- 5. Any party may cancel or terminate the ADA privileges or this enrollment subject to a 30-day written notice to the other party prior to termination date without prejudice to the fees and charges payable to PNB.
- 6. The Accountholder shall hold PNB free and harmless from any claim, damage or expense of whatever nature in case PNB fails or refuses to pay bills/premiums/service fees/membership fees/statements of account and such other amounts due to the Biller in the event of force majeure.