



Opening Doors, Building Tomorrows.

BALANCE TRANSFER PROMO

APPLICATION FORM

Terms and Conditions:

1. The Equicom Credit Card Balance Transfer (Equicom Balance Transfer) promotion is from April 19, 2016 to July 31, 2016.
2. The Equicom Balance Transfer promotion is open to all active and current Equicom Credit Cardholders of good credit standing.
3. The following terms and rates shall apply:

Term	Monthly Add-on Rate	Factor Rate	Effective Rate	Minimum Amount
3 months	1.00%	0.343333	17.91%	P3,000.00
6 months	1.00%	0.176667	20.28%	P3,000.00
9 months	1.00%	0.121111	21.11%	P5,000.00
12 months	0.70%*	0.090333	15.16%	P5,000.00
18 months	0.70%*	0.062556	15.36%	P10,000.00
24 months	0.70%*	0.048667	15.36%	P10,000.00

*promotional rate only

Sample Computation: 12 months

Amount to be transferred Php 50,000.00

Multiply by factor rate 0.090333

Monthly Amortization Php 4,516.50

4. In all instances, the balances to be transferred must be within the approved installment limit, monthly amortization should be within available credit limit and the gross amount within the available installment limit at the time of availment.
5. The credit card account/s applied for balance transfer must be from one and the same person's principal account/s with another bank. The account/s must be issued in the Philippines, with a minimum tenure of 12 months, and should be active and in good credit standing. The account/s should have a minimum credit limit of P10,000.00 and not over credit limit at the time of availment. Additional documents may be required if the Equicom Credit Card account name differs from the other account names for any other reason (i.e. cardholder was married, second name and middle initial missing, etc.).
6. The balances to be transferred may be the outstanding balance of the principal accounts, accrued interests, finance and other charges shown in the latest statement of account. The balances must be in Philippine peso only.
7. Upon approval of Equicom Balance Transfer application, Equicom Savings Bank (EqB) will settle the approved amount directly with the other credit card company of the applied accounts. It is the responsibility of the applicant to continue their payment to their other credit card accounts applied for Equicom Balance Transfer until EqB's payment has been cleared and reflected in their other credit card accounts. EqB shall not be liable for any fee incurred arising from late payment of the credit card accounts being transferred.
8. Processing of Equicom Balance Transfer application is within five (5) business days from receipt of complete documents and accurate details to actual payment of EqB to the other credit card companies. For new card applicants, the new application processing period shall not form part of the 5 business days.
9. In case of a pre-termination, the cardholder shall pay the unbilled total monthly amortizations in full and a pre-termination fee of 5% of the unbilled principal amount or P500.00, whichever is higher.
10. The cardholder may submit the Balance Transfer application through any Equicom Savings Bank branch, send via fax to (02) 2418975, or call the Equicom 24/7 Customer Service to apply.
11. If only a portion of the monthly amortization is paid, the corresponding finance charges will be applied.
12. EqB shall have the absolute exclusive right to approve or reject Equicom Balance Transfer applications based on its internal policies or for reasons it deems justifiable. Thus, if the cardholder has no sufficient available credit limit, EqB has the sole discretion to approve only a portion of the amount applied for.

Name of Cardholder/Applicant: _____

Last Name _____ First Name _____ Middle Name _____

Credit Card No. (if applicable): _____

Contact Details:

Home/Office _____

Mobile _____

Email Address: _____

CREDIT CARD / PERSONAL CREDIT LINE TO TRANSFER

Balance Transfer 1

Credit Card No. _____

Card Company: _____

Issue Date: _____ Expiry: _____

Credit Limit: _____ Current Outstanding Balance: _____

Amount to be Transferred _____ Preferred Term: _____

Balance Transfer 2

Credit Card No. _____

Card Company: _____

Issue Date: _____ Expiry: _____

Credit Limit: _____ Current Outstanding Balance: _____

Amount to be Transferred _____ Preferred Term: _____

By signing on this Balance Transfer Form, I hereby agree to be bound by the terms and conditions ("T&C") of the Equicom Balance Transfer Program and comply with the requirements set forth herein, as may be amended or supplemented by Equicom Savings Bank from time to time. I further agree to be bound by the T&C and mechanics of any existing and future promotion/s of Equicom Savings Bank in connection with the Balance Transfer program, and by the T&C governing the issuance and use of the Equicom Savings Bank Credit Cards, all as may be amended or supplemented by Equicom Savings Bank from time to time. I likewise agree that in case of insufficient credit limit, Equicom Savings Bank has the sole discretion to approve only a portion of the amount applied without prior notification to me; that Equicom Savings Bank shall have the absolute and exclusive right to approve or reject applications for Balance Transfer; that in case my Balance Transfer application is approved, Equicom Savings Bank is authorized to effect the payment of my obligation as specified herein. I understand that in case of disapproval, Equicom Savings Bank is under no obligation to notify me of such disapproval nor discuss the reason/s thereof.

Signature over Printed Name

Date Requested