



PHILIPPINE PUBLIC SCHOOL TEACHERS ASSOCIATION

“Bayani ka, gurong Pilipino. Ang PPSTA, Kumakalinga sa iyo!”

PPSTA Bldg No.2, 245 Banawe Street, Quezon City

Claims Department

Website: www.ppsta.net Email Addresses: ppstaclaims@yahoo.com and support@ppsta.net

Tel. No. (02) 8988-1415 loc. 119,121,137 -138 & 142-143

APPLICATION FORM

NEW MUTUAL RETIREMENT BENEFIT SYSTEM – EARLY REDEMPTION PROGRAM (NMRBS-ERP)

DATE: _____

Sir / Madam:

I have the honor to avail of the New Mutual Retirement Benefit System (NMRBS) EARLY REDEMPTION PROGRAM (ERP). Enclosed are the following documents:

1. **NMRBS Certificate of Membership**
In case of loss, **Affidavit of Loss** (re: PPSTA **NMRBS** Certificate)
2. **Signed (conforme section) Letter of Invitation**
3. **Clear photocopy of two (2) Valid ID's** with signature (back and front)

Upon receipt of the proceeds of the said benefit, I shall release and forever discharge the Association, its assigns and successors-in-interest from any similar claims whatsoever arising from my membership with the Association.

Specimen Signatures

Signature over printed name of member

Mobile Number

Present Address

Reminder:

- * This application must be originally signed by the applicant.
- * The signature in this application must be similar with the applicant's signature in the valid IDs that he/she will submit.
- * Strictly No Erasure and Tampering.

Please send my PPSTA NMRBS-ERP proceeds thru:

BDO Bank Remittance (Note: Reference Number will be sent at stated Mobile Number)

Direct Deposit to Personal Account (Note: Commercial Banks Only)

To ensure that we are crediting the correct bank account, kindly provide the accurate bank account and personal details listed below for us to deposit your check.

1. **Account Name:** _____

2. **Name of Bank:** _____

3. **Bank Account Number:** _____ **Account Type:** Current Savings Others

4. **Bank Address/Branch:** _____

5. Any of the following scanned or photographed copy of your record or evidence of bank account **CLEARLY** showing both **ACCOUNT NAME** and **ACCOUNT NUMBER**

- 5a. Bank account Passbook
- 5b. Validated deposit slip
- 5c. Bank Statement of Account
- 5d. Screenshot of online banking account details

In the event of the approval of my application for NMRBS-ERP, I hereby authorize PPSTA to credit the proceeds of the said benefit to my personal account I have indicated.

Regional Office _____

Mailing Address _____

Signature over printed name of member