



BANGKO SENTRAL NG PILIPINAS
PAYMENTS AND SETTLEMENTS OFFICE

PPB Form 2

Attach 2x2
photo

SMART CARD RENEWAL FORM
PhilPaSS Participant Browser (PPB)

Participating Bank (PB)/Institution Name		Complete Address (Please indicate zip code)	Date of Request
Name of Authorized User (Last Name, First Name, Middle Name)		Department	Phone No.
PPB User Account Name		Email Address	Mobile No.
I. Applicant's Signature: _____ Signature of Authorized User		II. Approved by: _____ Head of Institution/Authorized Signatory (Signature over Printed Name) _____ Date	
(To be accomplished by BSP)			
III. Recommending Approval: <input type="checkbox"/> Endorsed <input type="checkbox"/> Denied		IV. Approved by:	
_____ Authorized BSP-PSO Officer (Signature over Printed Name) _____ Date		_____ Head of BSP-PSO (Signature over Printed Name) _____ Date	
Processed by: _____ Authorized BSP-PSO Officer (Signature over Printed Name) _____ Date		Remarks:	

***Important note to applicants:** Kindly attach a fully accomplished Smart Card Kit pick-up documentary requirements which are available in the BSP website for BSP-PSO's evaluation.

Checklist of required documentation for claiming of *PhilPaSS* Smart Card Kit:

1. *Personal pick-up*

- Secretary's Certificate
- Release, Waiver and Quitclaim Form

2. *Thru Messenger/Authorized Personnel*

- Secretary's Certificate
- Release, Waiver and Quitclaim Form
- Special Power of Attorney

Remarks: _____