

Head Office

External Services

Controllershship Group

1. Certificate of Full Payment

Issuance of Certification of Full Payment to clients with collateral mortgaged

| | | | | |
|---|--|------------------------------|-------------------------------------|---|
| Office or Division: | Controllership Group | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2B - Government to Business, G2C - Government to Citizen | | | |
| Who may avail: | MSME Borrowers | | | |
| CHECKLIST OF REQUIREMENTS | | ISSUING/SOURCE ENTITY | | |
| Statement of Account | | Requesting party | | |
| CLIENT STEPS | AGENCY ACTIONS | FEES TO BE PAID | PROCESSING TIME | PERSON/S RESPONSIBLE |
| 1. Request for Certificate of Full Payment. | 1.1. Review Branch Accountants' validated Statement of Account (SOA). | None | 2 days (maximum) | Senior Financial Specialist Controllership Group |
| | 1.2. Prepare Certificate of Full Payment. | None | 15 minutes | Senior Financial Specialist Controllership Group |
| | 1.3. Sign the Certificate of Full Payment and the certified correct SOA. | None | 15 minutes | Group Head Controllership Group |
| | 1.4. Release signed SOA and Certificate of Full Payment to requesting party. | None | 15 minutes | Administrative Assistant Controllership Group |
| | 1.5. Release the signed SOA and Certificate of Full Payment to the Borrower. | None | 30 minutes | Account Monitoring Officer Account Monitoring Department |
| TOTAL | | None | 2 days 1 hour and 15 minutes | |

2. Certificate of Loan Repayments and Premium Contributions

Issuance of Certification of premium contributions and loan repayments made in behalf of the employees to various government agencies

| | | | | |
|--|--|------------------------------|----------------------------|---|
| Office or Division: | Controllership Group | | | |
| Classification: | Complex | | | |
| Type of Transaction: | G2C - Government to Citizen | | | |
| Who may avail: | Former employees of SB Corporation | | | |
| CHECKLIST OF REQUIREMENTS | | ISSUING/SOURCE ENTITY | | |
| Letter of Request for Certification | | Requesting party | | |
| CLIENT STEPS | AGENCY ACTIONS | FEES TO BE PAID | PROCESSING TIME | PERSON/S RESPONSIBLE |
| 1. Submit letter of request for certification. | 1.1. Check coverage period of certification being requested. | None | 30 minutes | <i>Senior Financial Specialist Controllership Group</i> |
| | 1.2. Process certification. | None | 6 days <i>(maximum)</i> | <i>Senior Financial Specialist Controllership Group</i> |
| | 1.3. Sign the Certification. | None | 15 minutes | <i>Group Head Controllership Group</i> |
| | 1.4. Release Certification to requesting party. | None | 15 minutes | <i>Administrative Assistant Controllership Group</i> |
| TOTAL | | None | 6 days and 1 hour | |