Metrobank

MERCHANT OUTLET DATA SHEET

Page 1- To be filled-out by the Merchant

☐ New ☐ Additional ** Please accomplish one (1) per outlet application*

LOCATION INFORMATION

Merchant Legal Name

Merchant Outlet Name

Complete Outlet Address

City Zip Code

Contact Person

Last Name *First Name* *Middle Name*

Contact Number

PAYMENT INSTRUCTIONS

Payment Grouping

☐ Consolidated ☐ Individual Payment per Outlet

Payment Details

Bank Code 001 Bank Name Metrobank

Branch Code Branch Name

Bank Account Name

Bank Account Number

Cheque Payee Name

Delivery Address

PAYMENT REPORT AND TAX DELIVERY

E-Mail Address

TIN of Outlet - - -