PRIVATE SECURITY INDUSTRY PERSONNEL EMPLOYEES AND GUARDS CREDIT COOPERATIVE

Ground Floor, Philippine Korea Friendship Center, Bayani Road, Fort Bonifacio, Western Bicutan, Taguig City
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INCISSENTIAL LOAN 2024

(Non-medical, Non-emergency, Non-educational -

INCIDENTAL but ESSENTIAL Credit)

THE BOARD OF DIRECTORS
PSIPAGCC

No._____

APPLICATION FORM

SIR/MADAME:

I have the qualification and eligibility per PSIPAGCC regulations, to apply for this loan:

Terms of Payment: **6 Months** **Frequency of Payment**: [ ] Monthly [ ] Semi-Monthly

The Maximum Loanable amount is **P 10,000.00**

PROMISSORY NOTE

For value received, I,_____ hereby promise to pay the PRIVATE SECURITY INDUSTRY PERSONNEL EMPLOYEES AND GUARDS CREDIT COOPERATIVE (PSIPAGCC) directly, or through its Cashier, or Treasurer, or through Payroll Deduction, the amount of_____ (P), payable in monthly installments of _____ (P); the first payment to be made on_____and every month thereafter until this loan, including interests and other charges, shall have been paid.

I hereby agree that, in case of default in the payment of any installment, or in case of my disability, retirement, resignation, absence without official lea1.e, and/or separation from the ser.1ce, the entire unpaid balance of this loan, including interests and other charges, shall immediately become due and payable without need of any formal demand. I hereby agree to wai1.e presentation of payment, demand, protest and notice of protest and dishonor of the same.

In case of the above mentioned cases, I hereby assign in favor of PSIPAGCC, without further notice, so much of my capital deposit, including earned dividends, with PSIPAGCC and all monies and monetary benefits due, or to be due, from my present Security Agency or employer/office, that would be sufficient to pay off the entire outstanding balance of this loan, including stipulated interests, service charges and fines. I, therefore, authorize my security agency's accounting/finance/payroll to deduct the necessary amounts from all monies due me and to remit the same directly to PSIPAGCC, thru its duly authorized representative.

I further agree that if I fail to pay any installments on the loan when due, I promise to pay a penalty/charge in accordance with the terms of the By-Laws and the Rules and Regulations of the PSIPAGCC. I also promise to abide by the Decision of the Board of Directors of PSIPAGCC on any matter relating to this loan. In case payment shall not be made at maturity, I shall pay costs of collection and attorney's fees in an amount equal to twenty percent of the principal and interest due on this promissory note and, in no event, shall such charge be less than one thousand pesos (P 1,000.00).

To be filled up by Agency GM/Head of Accounting or HRD or Finance/Paymaster:

Leave Credits as of Date: ———————
VL/SL remaining _____
Retirement Credits _____
Refunds, Bonuses, Bonds _____
CERTIFIED CORRECT BY & Date _____

With Pending Admin/DOLE/Criminal Case/s &/or,
With Pending Financial obligation / Administrative
O YES O NO
If yes, pls. specify _____
CERTIFIED BY & Date _____

For Purposes of Loan Processing:

Date of Birth: ——————————— Civil Status:_____

Present Home Address:_____

Contact Number: Landline: _____ Mobile No.: _____

Mode of Proceeds: O Cash or STARCASH O Credit to GCash# _____

[if GCash- additional fee of P30.00]

O Coop Check O Credit to savings -ATM# _____

Date | Applicant's Name and Signature | Detachment/ Office

SIGNATURE VERIFIED BY:

To be filled up by PSIPAGCC Only

Gross Amount of Loan _____
Includes: Service Fee _____
2 % Capital build-up _____
Notarial Fee _____
Credit Life Insurance _____
10% Compulsary Savings _____
Processing Fee _____
Others _____ _____
Net Amount of Loan P 10,000.00

Date Received: _____
Gross Salary/mo. P _____
Net Salary/mo. P _____

Monthly Installments
Principal P _____
Interest _____
Total _____

Period of Amortization _____

RECOMMENDING APPROVAL LOANS MANAGER _____ CEO/GM _____

ACTION TAKEN BY THE CREDIT COMMITTEE
[ ] APPROVED [ ] DISAPPROVED Reason: _____

CREDIT COMMITTEE SEC: _____

For PSIPAGCC Loan Department use only

Loan Processed by: _____ Loan AF received by and date: _____
(Print Name and affix Signature)

POLICY GUIDELINES ON THE AVAILMENT OF INCISSENTIAL LOAN

INCISSENTIAL LOAN ELIGIBILITY:

1. **Member in "good" standing** category of membership must be **at least 6 months on date of application.**
2. Good credit record with No Past-due or delinquency; and updated in payments of any existing loans for the past 6 months.
3. Debt-to-Income Ratio of 65% when considering any/all existing loans with the cooperative.
4. **Previous credit records or history for equivalent to the past 3 months.**
5. Agrees and consents to loan proceeds deductions, on programs of 2% Share capital build-up and 10% savings mobilization.
6. **If a co-maker is pre-required by management, he/she shall complete/execute the co-maker form (separate sheet/form) .**

CRITERIA FOR INCISSENTIAL LOAN APPROVAL:

1. Applicant Members must be in good standing (MIGS). NEW MEMBERS cannot yet avail of the loan.
2. This loan application shall be accompanied by Credit/Loan Insurance Protection Loan Insurance Form.
3. Applicant must be included in the 3 preceding and current regular payroll of present employer security agency.
4. Applicant must have a **monthly net take home pay of at least** Thirty Five percent (35%) as net salary, after all deductions have been made, BUT not including this loan applied for and its amortization.
5. Applicant for loan must have contributed at least for the past 6 months of his/her membership.
6. Applicant must have no pending criminal/administrative/DOLE case.
7. **Maximum terms of payment is Six (6) Months Only.**
8. The Maximum age requirement for availment/renewal of loan shall be Fifty-Nine (59) years old.

IMPORTANT: **A.** borrowers w/ prior DELINQUENCY shall incur ADDITIONAL INTEREST RATE of 0.25% when re-applying for any Loan **B.** ADDITIONAL SERVICE FEE of 1% shall be imposed for each, *where*: 1) with Policy Exception 2) Credit history reflects DELIQUENCY 3) TERM is EXTENDED (*re-structured)*.

INCISSENTIAL LOAN CHARGES:

1. **Interest Rate - 4.5% per month**
2. Service Fee - 500 | Processing Fee - 500
3. Capital Build Up - 2% | Compulsary Savings - 10%
4. Notarial Fee - Three Hundred Pesos (P 300.00)
5. CREDIT LIFE LOAN Protection INSURANCE premium rate shall be computed P 1.50 per every P1,000.00 of gross approved loan (inclusive of all deductions), and LPPI shall also be based on the loan term.

BLANKET AUTHORITY TO DEDUCT

Date: _____

I hereby authorize my present Security Agency or **employer** thru its accounting/finance department or thru its GM's office, or any duly authorized officer or department; to deduct from my salaries, leave commutation, bonuses, grants, incentives, 13th month pay, commission, insurance lump sum, rice ration, overtime pay, holiday pay, allowances, Saturday/Sunday premium pay, night differential, gratuity pay, per diem, retirement pay and all other applicable remunerations due in my favor; **in order to pay my accountabilities with PSIPAGCC** as follows:

1) For payment of my loan balance in case of my separation from the Agency-Company or from any delinquency or past-due balance(s) outstanding in the books of the Coop, for whatever reason.
2) For payment of my uncollected accounts or unapplied payroll deductions for the PSIPAGCC or its guaranteed creditors which have "remained uncollected" or considered "unapplied deductions", accrued receivables outstanding for at least 30 days, inclusive of interest and penalties.

Pinatutunayan ko na naiintindihan ko ng buong linaw ang ibig sabihin ng nakasaad sa itaas na "Blanket Authority to Deduct" at boluntaryo akong pumapayag sa mga kondisyones na binabanggit dito. Ito'y para sa aking kabutihan at ng lahat sa kooperatiba, at sa kabutihan ng PSIPAGCC na kung saan ako ay miyembro.

_____
BORROWER - Signature over Printed Name

SIGNATURE VERIFIED BY: