## PRIVATE SECURITY INDUSTRY PERSONNEL EMPLOYEES AND GUARDS CREDIT COOPERATIVE

Ground Floor, Philippine Korea Friendship Center, Bayani Road, Fort Bonifacio, Western Bicutan, Taguig City Tel Nos. 506-8139; 0917-1344871; 0933-5199379; 24\_7\_memberservices@psipagcc.ph; http://www.psipagcc.ph



| Date of Application |
|---------------------|
|---------------------|

THE BOARD OF DIRECTORS

## SUBJECT: MEMBERSHIP APPLICATION

Gentlemen,

I hereby apply for membership in the PSIPAG CREDIT COOPERATIVE (PSIPAGCCo) and agree to faithfully obey its rules and regulation as set down in its by-laws and amendments thereof and the decision of the general membership as well as those promulgated by the directors.

| (P40,000). P4,000 worth of shares in the both in Cash upon membership. I also ple months) monthly installments, payable in the minimum monthly installment of (P500) or TWO HUNDRED FIFTY PESTAGE and I will continue to pay this until I have paid FORTY THOUSAND PESTAGE. | e said subscription, plu<br>ledge to pay my subscr<br>n semi-monthly installn<br>contribution to the s<br>SOS (P250) every pl<br>amount [together with<br>OS (P40,000) or more<br>I during my membersh | pesos. I agree that that capital is FIVE HUNDRED PESOS us the insurance of (P50) pesos every the other mandatory monthly payments while I'm in active service. It is understood inp.(Payments/contributions made by me in |
|---|--|---|
| excess of my share capital of P40,000 v<br>deleted  | vill be considered as m  | ny savings deposit.) – Recommended to be  |
|   |  | Signature of Applicant  |
| PERSONAL DATA: (PLEASE PRINT LE   | GIBLY- USE BLACK I   | INK)  |
| Name  | Civil Status_  | No. of dependents:  |
| Date of BirthGender   | Name of Spouse   |   |
| Present Address   |  | Religion:   |
| Permanent Address   |  |   |
| Tel. / C.P. No.   | _Tin No  |   |
| Employer and/or Agency  |  | Tel No.:  |
| Years in Profession Previous  | DED  | ATIVE   |
| Date of employment  | Monthly Salar  | ry (Php)  |
| Salary Deductions   | Monthly Hous   | sehold Income   |
| Other source of income if any   | Monthly Ho   | usehold Expenses  |
|   |  |   |

ACTION OF THE BOARD OF DIRECTORS Approved by:

I have made and certify that the foregoing representations, information, declarations as true and accurate as of the date first above indicated; and agree that same data confidential or private shall be verified by PSIPAGCC and that same shall be considered as part of any prospective loan contract or agreement with the credit cooperative. In the absence of any notice shall be considered as a continuing statement; and I agree and undertake that any material change in any the foregoing shall be formally notified to PSIPAGCCo.

THE TREASURER/CASHIER OF THE PSIPAG CREDIT COOPERATIVE is also hereby authorized to collect from the paymaster of member's Employer/Agency, out of my salary the sum indicated above together with the required membership fee via automatic salary deduction or direct deduction/debit.

## PRIVATE SECURITY INDUSTRY PERSONNEL EMPLOYEES AND GUARDS CREDIT COOPERATIVE (PSIPAGCC)

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## PLEDGE on Regular MEMBERSHIP



| Ī           |  | я                                     | ( Licensed with No  | ) Security           |  |  |
|-------------|--|---------------------------------------|---|----------------------|--|--|
| Professiona | l within the Private S   | ecurity Industry with a               | current position of   | , Security           |  |  |
| employed    | by   |                                       | (Agency/Employer)   | and presently        |  |  |
| assigned/po | sted at  |                                       | (Agency/Employer); hereby apply for men                                       | mbership in the      |  |  |
| PRIVATE :   | SECURITY INDUSTF   | Y PERSONNEL EMPLO                     | DYEES AND GUARDS CREDIT   | COOPERATIVE          |  |  |
|             |  | •                                     | approved by the CDA and/or the P  |                      |  |  |
|             |  |                                       | nly Promise, and unequivocally Ul   | NDERTAKE, TO         |  |  |
| PERFORM     | (or guaranty performa  | nce of) the following CO              | OMMITMENTS:   |                      |  |  |
| 1.          | To make a mir  | imum MONTHLY C                        | ONTRIBUTION/deposit or SH   | ARE CAPITAL          |  |  |
|             |  |                                       | UNDRED PESOS (P500.00) Philipp  |                      |  |  |
|             |  |                                       | (provided that the corresponding auto   |                      |  |  |
|             | [which may include   | deductions for capital, sa            | vings and loan repayments] are <b>cro onth</b> by the withholding/deducting a | edited/remitted to   |  |  |
|             |  |                                       | proval from officers or / Board of Dire                                       |                      |  |  |
|             |  |                                       | BERSHIP PERMANENT SHARE CAP   |                      |  |  |
|             | CAPITAL INV  | ESTMENT Total Subscriptio             | n" the paid-up total amount of FORTY T  | THOUSAND PESOS       |  |  |
|             |  |                                       | n Full, or the minimum required in full,                                      |                      |  |  |
|             |  |                                       | of notice of membership approval from or Cashier, or via (semi-monthly) payre |                      |  |  |
|             |  |                                       | PSIPAGCC, the undersigned, and m  |                      |  |  |
|             | Agency- Empl   | <mark>oyer, or</mark> via PSIPAGCC ov | ver-the counter or direct payment, or   | deposit through an   |  |  |
|             | accredited loca  | l bank or remittance partners,        | ; and   |                      |  |  |
| 2           | To pay upon call a [o  | ne-time] Membership fee,              | the amount of ONE THOUSAND P  | ESOS (P1,000.00)     |  |  |
|             | Philippine currency; a   |                                       |   | , , ,                |  |  |
| 3           | To pay upon call the   | amount of ONE HUNDRI                  | ED PESOS (P200.00) Philippine Cui   | rency, as one-time   |  |  |
|             |  |                                       | credited bank/financial service pro   |                      |  |  |
|             |  | ΓM card with member's nar             |   |                      |  |  |
| 4.          |  |                                       | URANCE – with Medical reimburs  |                      |  |  |
|             |  |                                       | ution –payment of Fifty pesos (l  |                      |  |  |
|             |  |                                       | through payroll deductions which i  |                      |  |  |
|             | entered between/with   | PSIPAGCC, undersigned an              | nd Security Agency-employer; and  |                      |  |  |
| 5           | To contribute-pay ON   | LY on the next navroll d              | ate after "EVERY DEATH" of a P  | SIPAGCC "MIGS"       |  |  |
| 3           |  |                                       | eductions the <b>Bayanihan-ala-Damay</b>                                      |                      |  |  |
|             | abuloy]  |                                       |   | [                    |  |  |
|             |  |                                       | icable period not exceeding 30 da   |                      |  |  |
|             | pooled together as "A  | BULOY" or MUTUAL A                    | ID to benefit member's surviving heir   | rs /bereaved family; |  |  |
| 6           | Patronize LOANS,D  | EPOSIT, and the busines               | sses and services of PSIPAGCC,  | participate in the   |  |  |
|             |  |                                       | of PSIPAGCC attend and partic   |                      |  |  |
|             | •  | <u> </u>                              | , rules and regulations , and decision  | ons of the General   |  |  |
|             | Assembly and those a   | lopted by the board of Dire           | ctors.  |                      |  |  |
| Done this   | day of20   |                                       |   |                      |  |  |
|             |  | n                                     |   |                      |  |  |
|             | Print Name and Signature Permanent Home/Residence Address: [Mobile# (09] |                                       |   |                      |  |  |
|             |  |                                       |   | •••••                |  |  |
|             | •••••  |                                       |   |                      |  |  |
|             | ******   |                                       |   |                      |  |  |

Attested by: .....

Agency Officer-in-charge/ Supervisor/ Commander