



Pag-IBIG MULTI-PURPOSE LOAN APPLICATION FORM (MPLAF)

(TO BE FILLED OUT BY APPLICANT)

APPLICATION No. _____

FLS010

LAST NAME		FIRST NAME		MIDDLE NAME		MAIDEN NAME (For married women)		DESIRED LOAN AMOUNT	
Type or print entries								<input type="checkbox"/> MAX OF 60% (24-59 MOS.) <input type="checkbox"/> MAX OF 80% (AT LEAST 120 MOS.) <input type="checkbox"/> MAX OF 70% (60-119 MOS.) <input type="checkbox"/> OTHER AMOUNT PLS SPECIFY	
HOME ADDRESS (Pis indicate complete address)								GENDER CIVIL STATUS EMPLOYEE No. <input type="checkbox"/> MALE <input type="checkbox"/> SINGLE <input type="checkbox"/> WIDOWER <input type="checkbox"/> ANNULLED <input type="checkbox"/> FEMALE <input type="checkbox"/> MARRIED <input type="checkbox"/> LEGALLY SEPARATED	
MOTHER'S MAIDEN NAME								MOBILE PHONE No.	
								HOME TEL. No.	
								TIN	
BIRTHDATE		BIRTHPLACE		Pag-IBIG ID No.		SSS/GSIS ID No.			
mm		dd		yyyy					
COMPANY/EMPLOYER NAME								FOR AFP EMP-SERIAL/ACCOUNT No.	
								FOR DECS EMP - DIV. CODE/STATION CODE/	
								EMPLOYEE No.	
COMPANY/EMPLOYER ADDRESS (Pis indicate complete address)								OFFICE TEL. No.	
								TYPE OF LOAN	
								<input type="checkbox"/> NEW <input type="checkbox"/> PAYMENT OF HOUSING LOAN ARREARAGES <input type="checkbox"/> RENEWAL <input type="checkbox"/> OTHER <input type="checkbox"/> NON-HOUSING RELATED	
EMPLOYMENT HISTORY FROM DATE OF Pag-IBIG MEMBERSHIP (Use another sheet if necessary)								DATE OF Pag-IBIG MEMBERSHIP (Mo Yr)	
NAME OF EMPLOYER				ADDRESS				FROM (Mo./Yr.)	
								TO (Mo./Yr.)	

IN THE EVENT OF THE APPROVAL OF MY APPLICATION FOR MULTI-PURPOSE LOAN, I HEREBY AUTHORIZE Pag-IBIG FUND TO CREDIT MY LOAN PROCEEDS THROUGH MY PAYROLL BANK ACCOUNT THAT I HAVE INDICATED ON THE RIGHT PORTION.

SIGNATURE OF APPLICANT _____

MEMBER'S PAYROLL BANK ACCOUNT NO.									
NAME OF BANK/BRANCH (Where member maintains payroll account)									
BANK ADDRESS									

APPLICATION AGREEMENT

In consideration of the loan that may be granted by virtue of this application subject to the pertinent provisions of the Implementing Rules and Regulations of the Pag-IBIG Fund, I hereby waive my rights under R.A. No. 1405 and authorize Pag-IBIG Fund to verify/validate my payroll account number. Furthermore, I hereby authorize my present employer or any employer with whom I may get employed in the future, to deduct the monthly Pag-IBIG contribution and amortization due from my salary and remit the same to Pag-IBIG Fund. If the resulting monthly net take home pay after deducting the computed monthly amortization on MPL falls below the monthly net take home pay as required under the GAA/company policy, I authorize Pag-IBIG Fund to compute for a lower loanable amount.

Should I be classified as having an outstanding housing loan account in arrears for more than 9 months upon loan application but said account is not yet cancelled or foreclosed, I hereby assign the proceeds of the loan to Pag-IBIG Fund and authorize the latter to apply the said proceeds to the payment of my housing loan arrearages.

I understand that should I fail to pay the monthly amortization due, I shall be charged a penalty of 1/2% of any unpaid amount for every month of delay.

I further authorize my employer to deduct the outstanding balance of my MPL from my retirement and/or separation pay and remit the same to Pag-IBIG Fund. This authorization is irrevocable until such time that the said loan is fully paid.

In the event my retirement and/or separation pay is not sufficient to settle the outstanding balance of my MPL or my employer fails, for whatever reason, to deduct the same from said retirement and/or separation pay in settlement of the outstanding balance of my MPL, I hereby authorize Pag-IBIG Fund to apply whatever benefits are due me from the Fund to settle the said obligation.

I certify that the information given and any or all statements made herein are true and correct to the best of my knowledge and belief. I hereby certify under pain of perjury that my signature and thumbmarks appearing herein are genuine and authentic.

This office agrees to collect the corresponding monthly amortizations on this loan and the monthly Pag-IBIG contributions of herein applicant through payroll deduction, together with the Pag-IBIG employer counterpart contributions, and remit said amounts to Pag-IBIG Fund on or before the scheduled day of every month, for the duration that the loan remains outstanding. However, should we deduct the monthly amortization due from the applicant's salary but failed to remit it on due date, this office agrees to pay the corresponding penalties equivalent to 1/2% of any unpaid amount for every month of delay.

HEAD OF OFFICE OR AUTHORIZED REPRESENTATIVE
(Signature over printed name)

DESIGNATION _____

EMPLOYER SSS/ GSIS NO. _____ AGENCY CODE _____ BRANCH CODE _____

Signature of Applicant over Printed Name _____

COM TAX CERT NO _____

ISSUED ON _____ AT _____

LEFT THUMBMARK OF APPLICANT _____

RIGHT THUMBMARK OF APPLICANT _____

PROMISSORY NOTE

For value received, I promise to pay on due date without demand to the order of Pag-IBIG Fund with principal office at the Atrium of Makati, Makati Ave., City of Makati the sum of Pesos: _____

(P _____) Philippine Currency, with the interest rate of 10.75% p.a. for the duration of the loan.

I hereby waive notice of demand for payment and agree that any legal action, which may arise in relation to this note, may be instituted in the proper court of Makati City.

Finally, this note shall likewise be subject to the following terms and conditions:

- The borrower shall pay the amount of Pesos _____ through payroll deduction over a period of 24 months. In case of resignation/separation from the employer, suspension from work, leave of absence without pay, or insufficient monthly net take home pay prior to full payment of this loan, monthly full payments should be made directly to the Pag-IBIG Fund office where the loan was released.
- Payments are due on or before the _____ of the month starting on _____ and 23 succeeding months thereafter.
- Payments made by the borrower after due date shall be applied in the following order of priorities: Penalties, interest, and principal.
- A penalty of 1/2% of any unpaid amount shall be collected from the borrower for every month of delay.
- The borrower shall be considered in default in any of the following cases:
 - Any willful misrepresentation made by the borrower in any of the documents executed in relation hereto.
 - Failure on the part of the borrower to pay any 3 consecutive monthly amortizations.
 - Failure of the borrower to pay any 3 consecutive monthly membership contributions.
 - Any violation made by the borrower on existing policies, rules, regulations and guidelines of the Pag-IBIG Fund.
- In the event of default, the outstanding loan balance, all accumulated interests and penalties shall become due and demandable. The outstanding obligation shall be deducted from the Total Accumulated Value (TAV) credited to the borrower at the end of the term of the loan. However, immediate offsetting of the borrower's outstanding loan obligation may be effected upon occurrence of any of the following justifiable reasons and upon validation by the Fund: Unemployment; total or partial disability, as certified by a duly licensed physician; illness of the member-borrower or any of his immediate family member; or death of any of his immediate family members. Under the foregoing instances, the borrower hereby authorizes the Pag-IBIG Fund to offset the outstanding obligation against his TAV.
- In case of membership termination prior to full payment of the loan, no claim for provident benefit shall be paid to the borrower or his beneficiaries until after the full satisfaction of any amount arising from this note which remains unpaid as of the date of such termination.
- In case of falsification, misrepresentation or any similar acts committed by the borrower, Pag-IBIG Fund shall automatically suspend his loan privileges indefinitely. The borrower shall abide with all the applicable rules and regulations governing this lending program that Pag-IBIG Fund may promulgate from time to time.

Signed in the presence of _____

Witness (Signature over Printed Name) _____

Witness (Signature over Printed Name) _____

Signature of Applicant over Printed Name _____

THIS PORTION IS FOR Pag-IBIG FUND USE ONLY

PARTICULARS	NONE	WITH	DV/CHECK NO. / APPLICATION NO.	DATE FILED / DV NO.	VERIFIED	DATE
CLAIMS						
HOUSING LOAN						
MPL						

LOAN APPROVAL

LOAN AMOUNT GRANTED	INTEREST	PREVIOUS LOAN BALANCE	LOAN PROCEEDS	MONTHLY AMORT
REVIEWED BY	DATE	APPROVED BY	DATE	DISAPPROVED BY
				DATE

THIS FORM CAN BE REPRODUCED. NOT FOR SALE

iRevised 07/2/06