NPC - PROVIDENT FUND

FORM No. 023 Rev. 01 102019 (ERAL)

Important: Please read rules and regulations at the back before filing out this form.

Forms not completely filled out and lack of requirements shall not be accepted and processed.

***FILING:	November 4					F	V22 1	ата			(FR	ΔΙ)			
Application No.			nterest Rate					ASSISTANCE LOAN			Loan Payment Preference				
		6%		()12mo (() 24mo) 48mo) 72mo				Through Check Through Cash Card Cash Card No.: (Attach Cash Card copy) 60-3131 - 0230			ard copy)	
				TO BE	FILLED	D UP	BY THE N	IEMBER	R / APPLICA	NT					
DCE No.	L	ast Name			First Name	9		Mido	lle Name		Entrance	To duty(mmddyy)	Nature of A	opointment	
Position							CC No. / Name	9							
Civil Status		Contact I	No. (Mobile No. a	nd Local No	0.)		Date of Birt	h (mmddyy)	1		Salar	y Rate			
Region	HO	Spug	Luzon		Spug Vis	sayas	Spug	g Mindana		(I Plants	Please spe	ecify Other Regior	s)		
DCE No.		Last Nan	ne, First Name, M	I							CC No. / I	Name			
		Position Basic pay					Basic pay	pay Cont				ontact No. (Cel#/Local)			
D Co-Maker 2	CE No.	Last Nan	Last Name, First Name, MI									CC No. / Name			
		Position					Basic pay			C	ontact No	. (Cel#/Local)			
D Co-Maker 3*	CE No.	Last Nan	Last Name, First Name, MI									CC No. / Name			
		Position					Basic pay			C	ontact No	. (Cel#/Local)			
					P	RO	MISSOR	Y NOT	E						
conditions of loan is lower my salary th	ration of th the NPC-Provid than what is he e monthly insta default of the bo	dent Fund v reby applied Ilments on	which I have re d for, I am()	ad and u willing	(P Inderstoo () unwil	d clea ling to	rly and to wi) plus ir nich I here n reduced	amount. I also	her charge f. It is und hereby au	es there erstood t ithorize t	on in accorda that in case the he HR/Finance	nce with the amount of a lncharge t	ne terms and the approved to deduct from	
Signature Over Printed Name Applicant					Over Printe o-Maker 1	ed Nam	ne Signature Over Printed Name Co-Maker 2				Signature Over Printed Na Co-Maker 3				
			ASSIGN	MENT	OF SEP	ARA	TION BEN	EFITS F	OR NEGATI	VE EQU	* to b	e filled-up in case	of insufficient	equity	
TO THE NPC	- PF BOARD OF	TRUSTEE	3												
Fund which	n in consideration I received, do h nefits in the form	ereby auth	orize and emp	ower NP	C-PF to s	et off,	collect or wi	thhold an and other		ponding to	the outs	•	inclusive o	C Provident f interest due	
			ESS WHERE O	F, I have I	hereunder	affixed			_ day of	20_	at Qu	iezon City			
												Signature C	Ver Printed	Name	
					S	WO	RN STA	LEWEN	IT						
preventive s	that; a) I am uspension invol (No.) emp) gainfully emp	ving withho ployees of t	lding of salary he Corporatior	; d)() n in the to	there is	no pe nt of P	ending admir Php	nistrative	and/or criminal ; f) () I	l charge ag l have no p	gainst m	e; e) I am () not ()	a co-maker to	
												Signature C	ver Printed	Name	
Loans to be I	Deducted: (please	indicate Loan	lype)	_											
				-			· · · · · · · · · · · · · · · · · · ·		1						

FURTHER, I HEREBY AGREE

1. That I shall conform to any changes, modifications or amendments of policies, rules and regulations including the interest rates, terms and conditions of the loan;

2. That any misrepresentation of material facts is a ground for disapproval of the application, cancellation of the loan.

The foregoing statements and information made for the purpose of obtaining credit are true, correct and complete to the best of my knowledge and belief.

		CREDI	REPORT								
			To be accomplished by SLA, COOP and HR / Regional Counterpart and Other Regional Lending institutions:								
To be accomplished by the Applica	ant				115.						
Gross Salany		Concerned		Amount of	Amoun	t Authorized					
(as of the Month of Application)	Gross Salary Php			Type of Loan	Amortization	Approve					
Less: Total Deductions			NPCSLA								
NET Salary	Php		NPC COOP								
LESS: (per Section 33 of General			HR / Regional /								
Appropriation Act)			Plant								
· · · · · · · · · · · · · · · · · · ·		5,000.00	Counterpart								
Net Monthly Paying Capacity Php			Others (For Regions)								
			(· ····g····)								
TO BE ACCOMPLISHED BY NPC - PF LOAN ANALYST											
LOAN CO	OMPUTATION										
Approved Amount of Loan	Bho		Amount of Loop	Approved							
· • • • • • • • • • • • • • • • • • • •	Php		Amount of Loan Approved :								
Less: LRI			Check No.		Check Date:						
Filing Fee / Processing Fee											
-			Repayment Period	I Interest Rate	Monthly Amo	ortization	Date of 1st Monthly				
Accrued Interest							Amortization				
- Others											
Total Deductions			mos.	6%	P						
					•						
Net Amount	Php										
Processed by:											
Processed by: A	Audited by:	R	eviewed by:		Approved by:						
J.S.BALLESTEROS	F.B. DAYAC		T.G. CABILA R. M. MANANSALA								
Loan Analyst	Financial An	alyst	Section Chief NPC - PF Administrator								
CHECKLIST O	F REQUIREMENTS		SANCTIONS								
Duly accomplished application forr	m supported by the follo	wing documents	* All loan privileges including payment of equity dividend are suspended to								
, , , , , , , , , , , , , , , , , , , ,		wing documents	commence one (1) year after full payment of the one and demandable loan.								
* Latest Payslip (Borrower and	d Co-Maker)	* Penalty of 2% per month to any unpaid intentional or unintentionally shall be collected from the borrower from the day it becomes due and demandable until									
* Company ID (Borrower and (Co-Maker)		fully paid.								
* Equity dividend bonus/es and other claims shall be applied to full arrearages & surcharges.											
QUALIF	FICATIONS	* Loan privileges are suspended until full payment of arrearages and									
			surcharges.								
* Active member											
 2 co-maker or 3 comaker for neg Co-maker should have sufficient 		VIOLATIONS									
* GFAL Voucher (if applicable)	paying suparity and contin		* Misrepresentation of facts and falsification of public documents								
,			* Failure to pay monthly amortization								
Note: All desuments should b	a presented in original and										
Note: All documents should be presented in original and photocopy. For Plants, HR should certify all the documents prior to submission to the NPC PF Office.											
Signature Over Printed Name		er Printed Name	Signature Over Printed Name Signature Over Printed Name								
Applicant	Co-	Maker 1					Co-Maker 3 e of insufficient equity				