

2ND Floor, DACCO MPC Building, #40 Anabu Road, Anabu II-B, Imus City, Cavite

Contact No. 546-7497 / 09175448439 / 09500564158

LOAN APPLICATION FORM

(NOTE: FILL UP PROPERLY AND WRITE LEGIBLY. FILL UP ALL NECESSARY INFORMATION/S. INCOMPLETE INFORMATION WILL DELAY THE PROCESSING OF THE LOAN.)

T	ype	of	Loan:	_
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Date of Application: _____

I. Applicant's Personal Information

Name of Applicant:

				Contact No.:	
Surname	First Name	Middle Name		Date of Birth:	
Present Address:	7			Place of Birth:	
Present Address:				Sex:	
				Civil Status:	
House Number/Blk Lot/Subo	l. Barangay	Municipal	Province	Tin No.:	
				Valid ID:	
Occupation:		ource of Income: _		Monthly Income:	
Business Type / Name of Age	ency:				
Business Address/Agency Ad	ldress:				
Name of Spouse:		Occupation:		Monthly Salary:	

hereby apply for a loan of	_ pesos for a period of	(days / months /		
year/s) at the present interest rate of	percent per month/annum pa	ayable in		
amortization to be paid in daily / monthly / annually equal installments of pesos.				

Purpose/s of the Loan: __

II. Property (ies) Offered as Collateral: Description of Property(ies) Market Value Appraised Value Loan Value (LV) (State the title/Tax Declaration No., location, lot area, type of land, improvement & area, etc.) Market Value Appraised Value Loan Value (LV) Margin of Safety Imagin of Safety Imagin of Safety Imagin of Safety Imagin of Safety

DECLARATION AND SPECIMEN SIGNATURE

- 1. I, whose specimen signature appears below, confirm that all the information disclosed in this member information sheet is correct and complete. Any changes in the foregoing information shall be communicated DACCO MPC. I hereby authorize DACCO MPC to verify and investigate any and all information given by me which DACCO MPC may deem appropriate.
- 2. I hereby acknowledge and authorize DACCO MPC:
 - a. the regular submission and disclosure of my basic credit data (as defined under Republic Act No. 9510 and its implementing Rules and Regulations to the Credit Information Corporation (CIC) as well as any updates or corrections thereof;
 - b. the sharing of my basic credit data with other lenders authorized by the CIC, and credit reporting agencies duly accredited by the CIC.

I further Certify that the above statements are true and correct and that in case of misrepresentation, the Cooperative has the right to demand the full balance of my loan including all charges attached thereto and may further result to the termination of my membership. I authorize the DACCO MPC to obtain such other information as may be required in connection with this application. I am aware that to use the proceeds of this loan for purposes other than those indicated herein is prohibited.

(Signature over Printed Name of Borrower)

CREDIT ASSESMENT/VALIDATION

(TO BE FILLED-UP BY THE LOAN OFFICER/ACCOUNTING CLERK)

This is to certify that the MAKER/BORROWER/MEMBER and his/her corresponding CO-MAKER/S of this Loan Application have the following account balances/obligations with this Coop.

Name (borrower):	Date of Membership:	
Savings Deposit:		
Time Deposit:		
Paid-up Share Capital:		
	_,,,	,
		,
	Date of Membership: _	
Savings Deposit:		
Time Deposit:		
Paid-up Share Capital:		
	,,,,	,
	Date of Membership: _	
Savings Deposit:		
Time Deposit:		
Paid-up Share Capital:		
		,
(If more than two co maker use addition	al form)	
Other comments/recommendations:		
I further certify that the above assessm	ent and validation are based on records and	performance the member-borrower/co
maker/s and have been further verified t	o be true and correct to the best of my knowle	dge.
Prepared by:		
(Signature over Printed Name) (Po	osition/Designation) (Date of V	/alidation)
Additional comments/recommendations	(coop manager):	
FOR USE OF COOPERATIVE ONLY	ACTION ON THE LOAN APPLICATION	
Manager	Credit & Collection Committee	Board of Directors
Recommended/ Approved for	Recommended/Approved for	Approved for pesos /
pesos	pesos	Disapproved due to:
·	·	
_Disapproved/ Recommended for	Disapproved/Recommended for	
disapproval due to:	Disapproval due to:	

Signature/Date_ Signature/Date_

Signature/Date_

Board Res. No.

Date

Signature

Date

PROMISSORY NOTE

Promissory Note No.	Date Granted:
Name of Borrower:	
Address:	

For value received, I/we, jointly and severally, promise to pay to the order of the DAMAYAN SA CAVITE COMMUNITY MULTI-PURPOSE COOPERATIVE (DACCO MPC) its Office located at the 2nd Floor DACCO MPC Bldg., #40 Anabu II-B, City of Imus, Cavite the sum of PESOS: ______

______, Philippine Currency, together with the interest thereon, at the following dates, interest rate and amount of monthly amortizations until fully paid:

Date DueInterest RateInstallment

(Schedule of amortizations is attached as "Annex A" and made part hereof)

The principal, together with the accrued interest, shall be paid over a period of months commencing on :

A BORROWER who fails to pay any amortization due shall be deemed in default. In which case, the cooperative shall charge the following:

- a. Additional interest at the rate of 16% per annum for the principal outstanding balance from maturity date until fully paid.
- b. Penalty equivalent to 24% per annum for the principal portion already in arrears.

Penalty shall be charged until arrearages are fully paid. Otherwise, such default shall be considered a sufficient ground for DACCO MPC to institute legal proceedings for the collection of this notes or foreclosure of the mortgage.

In case of termination of my/our membership or separation of my employment with the cooperative, I/we hereby assign in favor of the DACCO MPC all monies due to me/us from the cooperative to serve as further guarantee for the payment of this obligation. The assignment shall remain in full force and effect until the full payment of this account with the cooperative.

Effective upon non-payment of the loan or any amortization thereof, when due, I/we hereby authorize the cooperative to apply to the payment of this note, any and all monies, deposits, securities and things of value which may be in its hands, on deposit, or otherwise belonging to me/us, and for this purpose, I/we hereby, jointly and severally, irrevocably constitute and appoint the said cooperative to be my/our true Attorney-in-Fact with full power and authority for me/us and in my/our names and behalf, without prior notice, to negotiate, sell and transfer any monies, securities and things of value which it may hold, by public or private sale, and apply the proceeds thereof to the payment of this note. It is likewise understood that any partial payment or performance on this note or any extension granted which will neither alter nor vary the terms of the original conditions of the obligation, nor discharge the same, and such partial payment or performance shall be considered as written acknowledgement of this obligation which shall interrupt the period of prescription.

I/we hereby expressly consent to be bound to any extension of payment and/or renewal of this note, in whole or in part, as well as to the terms of payment and/or any partial payment of this note which may be granted to any one of us, without notice and/or without consent and without need of executing a new or renewal note.

Should it become necessary to collect this note through an attorney-at-law, I/we hereby expressly agree to pay, jointly and severally, twenty percent (20%) of the total amount due on this note as attorney's fees which in no case shall be less than P1,000.00 , exclusive of all costs and fees allowed by law.

Demand and Dishonor Waived. Holder may accept partial payment and grant renewals or extensions of payment reserving its right of recourse against the accommodation of all costs and each and all endorsers to this note.

In case of judicial execution of this obligation, or any part of it, I/we hereby waive all my/our rights under the provisions of Rule 39, Sec. 13 of the Revised Rules of Court.

Name and Signature of the Borrower	Name and Signature of the Spouse
CONFORME	
Name and Signature of Co-maker	Name and Signature of Co-maker
SIGNED IN THE PRES	SENCE OF:
Name and Signature of Witness Na	ame and Signature of Witness
ACKNOWLEDGE	MENT
REPUBLIC OF THE PHILIPPINES)	
Province of Cavite) S.S.	
City of Imus)	
BEFORE ME, this day of following personally appeared:	in the City of Imus, the
Name	Identification Doc. No

known to me to be the same persons who executed the foregoing Promissory Note, consisting of (2) pages including this page on which this acknowledgement is written, signed by the borrower and his/her instrument witnesses on each and every page thereof, and acknowledged to me that the same is their own free and voluntary act and deed.

Notary Public

Doc. No. ____ Page No. ____ Book No. ____ Series of ____



DAMAYAN SA CAVITE COMMUNITY MULTI-PURPOSE COOPERATIVE (DACCO MPC) 2ND Floor DACCO MPC Building #40 Anabu II-B, Imus City, Cavite Contact No. 546-7497 / 09175448439 / 09224635281

HOUSEHOLD INCOME AND EXPENSES FORM

MONTHLY INCOME		
SOURCE OF INCOME:	Borrower	Spouse
1. Salaries and Wages (Net)		
2. Income from Business (Net)		
3. Other Income		
Total Income	Р	
Less: Expenses		
1. Food Expenses		
2. House Rentals		
3. Education Fees: Tuition Fees		
Miscellaneous		
Book, School Supplies, etc.		
4. Clothing		
5. Medical and Dental Expenses		
6. Personal Hygiene Expenses		
7. Cooking gas Expenses		
8. Transportation		
9. Water Bill		
10.Electricity Bill		
11. Telephone/Internet Bill		
12. Laundry Expense		
13. Salary for Helper		
14. Taxes and Licenses		
15. Productive Loans (other Banks/Coops		
16. Housing Amortization		
17. Vehicle Amortization		
18. Appliance Amortization		
19. Payments of Premiums		
20. Others (pls. specify)		
Total Expenses	Р	
Net Savings (after all expenses deduction)	Р	

I hereby certify to the correctness and truthfulness of above statements according to my personal knowledge and belief. Any false declaration, which may be discovered, shall cause the disapproval of my loan application.

Signature over Printed Name of Borrower

Date