



DAMAYAN SA CAVITE COMMUNITY MULTI-PURPOSE COOPERATIVE (DACCO MPC)

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.)

Type of Loan: _____

Date of Application: _____

I. Applicant’s Personal Information

Name of Applicant:

_____ Contact No.: _____
Surname First Name Middle Name Date of Birth: _____
_____ Place of Birth: _____
Present Address: _____ Sex: _____
_____ Civil Status: _____
House Number/Blk Lot/Subd. Barangay Municipal Province Tin No.: _____
Valid ID: _____
Occupation: _____ Source of Income: _____ Monthly Income: _____
Business Type / Name of Agency: _____
Business Address/Agency Address: _____
Name of Spouse: _____ Occupation: _____ Monthly Salary: _____

I 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 payable 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) (State the title/Tax Declaration No., location, lot area, type of land, improvement & area, etc.)	Market Value (MV)	Appraised Value (AV)	Loan Value (LV)
Margin of Safety			

DECLARATION AND SPECIMEN SIGNATURE

- 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.
- I hereby acknowledge and authorize DACCO MPC:
 - 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;
 - 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)

(Signature over Printed Name of the Spouse)

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: _____
Existing Loan: _____, _____, _____
_____, _____, _____
Total loan balance: _____

Name (co maker): _____ Date of Membership: _____
Savings Deposit: _____
Time Deposit: _____
Paid-up Share Capital: _____
Existing Loan: _____, _____, _____
_____, _____, _____
Total loan balance: _____

Name (co maker): _____ Date of Membership: _____
Savings Deposit: _____
Time Deposit: _____
Paid-up Share Capital: _____
Existing Loan: _____, _____, _____
_____, _____, _____
Total loan balance: _____

(If more than two co maker use additional form)

Other comments/recommendations:

I further certify that the above assessment and validation are based on records and performance the member-borrower/co maker/s and have been further verified to be true and correct to the best of my knowledge.

Prepared by:

(Signature over Printed Name) (Position/Designation) (Date of Validation)

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 _____ pesos	__ Recommended/ __ Approved for _____ pesos	Approved for _____ pesos / __ Disapproved due to: _____
__ Disapproved/ __ Recommended for disapproval due to:	__ Disapproved/ __ Recommended for Disapproval due to:	_____
_____	Signature/Date _____	
Signature _____	Signature/Date _____	Board Res. No. _____
Date _____	Signature/Date _____	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 Due	Interest Rate	Installment
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(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 12% 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

Name and Signature of Co-maker

Name and Signature of Co-maker

CONFORME:

SIGNED IN THE PRESENCE OF:

Name and Signature of Witness

Name and Signature of Witness

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES)
Province of Cavite) S.S.
City of Imus)

BEFORE ME, this ____ day of _____ in the City of Imus, the following personally appeared:

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 MULTIPURPOSE COOPERATIVE (DACCO MPC)

2ND Floor DACCO MPC Bldg. # 40 Anabu II-B Imus City, Cavite

PANGAKO NG KASAMA SA PAG-UTANG

(CO-MAKER/GUARANTOR STATEMENT)

Ako/kami ✓ _____ at ✓ _____ ay pumapayag na maging kasama sa pag-utang (co-maker/guarantor) ng miyembrong si G./Gng. ✓ _____ sa kanyang hinihiling na utang sa Damayan sa Cavite Community Multipurpose Cooperative (DACCO MPC) na nagkakahalaga ng ✓ _____ PESOS (P/✓ _____). Dahil dito, ako/kami ay kusang loob na lalagda sa kaukulang Pangako ng Pagbabayad (Promissory Note).

Bilang kasama sa pangungutanng (co-maker/guarantor), lubos kong/naming naiintindihan ang aking/aming responsibilidad na sakaling hindi makabayad si G./Gng. ✓ _____ sa nasabing hinihiling na utang, ako/kami ay may obligasyon na bayaran ang nasabing halaga o anumang bahagi nito na hindi nya nabayaran.

Pangalan ng kasama sa pag-utang (Co-maker/Guarantor): ✓ _____

Tirahan: ✓ _____

[] Nagmamay-ari ng Bahay [] Nangungupahan Telepono Bilang: ✓ _____

Pangalan ng Asawa: ✓ _____

Hanapbuhay: [] Empleyado ([] Permanente [] Kontraktual) [] May Negosyo

Buwanan o Taunang Kita: ✓ _____

Pangalan ng Kumpanya/Negosyo: ✓ _____

Adres ng Kumpanya/Negosyo: ✓ _____

Posisyon sa Kumpanya/Negosyo: ✓ _____

Pangalan ng kasama sa pag-utang (Co-maker/Guarantor): ✓ _____

Tirahan: ✓ _____

[] Nagmamay-ari ng Bahay [] Nangungupahan Telepono Bilang: ✓ _____

Pangalan ng Asawa: ✓ _____

Hanapbuhay: [] Empleyado ([] Permanente [] Kontraktual) [] May Negosyo

Buwanan o Taunang Kita: ✓ _____

Pangalan ng Kumpanya/Negosyo: ✓ _____

Adres ng Kumpanya/Negosyo: ✓ _____

Posisyon sa Kumpanya/Negosyo: ✓ _____

Pinapatunayan ko/namin na ang mga nakasaad sa itaas ay pawang totoo at tama.

✓ _____
(Pangalan at Lagda ng Kasama sa Pag-utang)
Co-Maker/Guarantor

✓ _____
(Pangalan at Lagda ng Kasama sa Pag-utang)
Co-Maker/Guarantor



Damayan sa Cavite Community Multipurpose Cooperative (DACCOPC)

2nd Floor Barangay Hall, Anabu II-B, City of Imus, Cavite

MEMBER'S PROPERTY CHECKLIST FORM

Name: _____ Membership Number: _____
Address: _____

A. OWNED APPLIANCES AND FURNITURES

	BRAND	DATE ACQUIRED
<input type="checkbox"/> REFRIGERATOR		
<input type="checkbox"/> ELECTRIC FAN		
<input type="checkbox"/> SALA SET		
<input type="checkbox"/> GAS RANGE		
<input type="checkbox"/> COMPUTER SET		
<input type="checkbox"/> MICROWAVE OVEN		
<input type="checkbox"/> TELEVISION SET		
<input type="checkbox"/> WASHING MACHINE		
<input type="checkbox"/> AIRCONDITION UNIT		
<input type="checkbox"/> VCD/DVD		
<input type="checkbox"/> DINING TABLE AND CHAIRS		
<input type="checkbox"/> CABINETS & OTHER FURNITURES		
<input type="checkbox"/> OTHERS		

B. OWNED VEHICLES

	TYPE	MODEL	CR/OR NUMBER
<input type="checkbox"/> CAR			
<input type="checkbox"/> JEEPNEY			
<input type="checkbox"/> TRICYCLE			
<input type="checkbox"/> MOTORBIKE			

C. REAL PROPERTIES

	OCT/TCT NUMBER	AREA (SQ.M)	LOCATION
<input type="checkbox"/> OWNED LOT			
<input type="checkbox"/> OWNED HOUSE & LOT			
<input type="checkbox"/> MORTGAGED LOT			
<input type="checkbox"/> MORTGAGED HOUSE & LOT			
<input type="checkbox"/> RENTED HOUSE & LOT			

I do certify that the above information is true and correct.

Member Signature / Date

To be filled up by C.I. Officer

Date and time visited: _____

Remarks: _____

Verified By:

Noted By:

Name and Signature
C.I. Officer

Name and Signature
Chairman - CRECOM



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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	P	
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	P	
Net Savings (after all expenses deduction)	P	

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