



**BENGUET STATE UNIVERSITY AND COMMUNITY MULTIPURPOSE COOPERATIVE (BSUCMPC)**

CDA Reg. No.: 9520-15000523 / CIN No.: 0103150134  
 BSU Compound, Balili Road, KM 5, La Trinidad, Benguet  
 Telephone Nos.: (074) 619-8354, (074) 248-3036 / Telefax: (074) 422-1846  
 Website: [www.bsucmpc.com](http://www.bsucmpc.com) eMail Address: [bsucmpc1999@gmail.com](mailto:bsucmpc1999@gmail.com)

**BSUCMPC Form 7**

**LOAN APPLICATION FORM**

Date: \_\_\_\_\_ Date Received: \_\_\_\_\_  
 Name of Borrower : \_\_\_\_\_ Contact No.: \_\_\_\_\_  
 Present Address : \_\_\_\_\_  
 Home Ownership : \_\_\_\_ owned (not mortgaged); \_\_\_\_ renting; house owner: \_\_\_\_\_  
 \_\_\_\_ living with parents/relatives; \_\_\_\_ owned (mortgaged); bank name: \_\_\_\_\_  
 Provincial Address : \_\_\_\_\_  
 Date of Birth : \_\_\_\_\_ Age: \_\_\_\_\_ Civil Status: \_\_\_\_\_  
 ( ) Employed ( ) Self-employed Nature of Work: \_\_\_\_\_  
 Employers' / Business Name : \_\_\_\_\_  
 Employers' / Business Address: \_\_\_\_\_  
 Employers' / Business Contact No : \_\_\_\_\_  
 Name of Spouse : \_\_\_\_\_ No. of Dependents: \_\_\_\_\_

I hereby apply for a loan in the amount of \_\_\_\_\_ (P \_\_\_\_\_)  
 on any of the following windows:

Agricultural Loan	Business Loan - Regular	Household Multipurpose Loan
Angelica Loan	Business Loan – DTI (SME)	Housing/ Home Loan
Appliance Loan	Calamity Loan	Industrial Loan
Asset Acquisition - Regular	Co-maker Loan	Medical/ Hospitalization Loan
Asset Acquisition - Transport	Commodity – Grocery Loan	Salary Deduction Loan Facility
Back to Back Loan	Educational Loan	Travel and Tours Loan
Big Brother – Small Brother Loan	Emergency Loan	

Purpose: \_\_\_\_\_

Payable within \_\_\_\_\_ months/\_\_\_\_\_ year/s in \_\_\_\_\_ monthly \_\_\_\_\_ quarterly \_\_\_\_\_ semi-annually or \_\_\_\_\_  
 lump sum installment at the rate of \_\_\_\_\_ %per annum.

In consideration of the said loan, I/we hereby authorize to the Cooperative the following mode of payment:

- |  |  |
|--|--|
| <input type="checkbox"/> Salary deduction                          | <input type="checkbox"/> Over the counter payment (office) |
| <input type="checkbox"/> Automated Teller Machine (ATM) withdrawal | <input type="checkbox"/> Postdated checks (PDCs) deposits  |
| <input type="checkbox"/> Field collection (c/o collectors)         | <input type="checkbox"/> Others: _____                     |

I bind myself and solidarity for the herein obligation and I further assign the following as security for the said loan:

- |  |  |
|--|--|
| <input type="checkbox"/> Share capital/fixed deposit                         | <input type="checkbox"/> Savings and time deposits         |
| <input type="checkbox"/> Real estate property mortgage                       | <input type="checkbox"/> Bonuses and other benefits/claims |
| <input type="checkbox"/> Co-maker's share capital, savings and time deposits |  |

\_\_\_\_\_  
 Borrower's Signature

\_\_\_\_\_  
 Spouse Printed Name & Signature

\_\_\_\_\_  
 Co-maker's Name & Signature Address: \_\_\_\_\_ Contact No.: \_\_\_\_\_

\_\_\_\_\_  
 Co-maker's Name & Signature Address: \_\_\_\_\_ Contact No.: \_\_\_\_\_

\_\_\_\_\_  
 Co-maker's Name & Signature Address: \_\_\_\_\_ Contact No.: \_\_\_\_\_

-----  
 This is to certify that the above applicant/co-maker for the loan has the following balance/s as of the date of application:

APPLICANT	LOAN ASSESSMENT
Fixed Deposit : _____	Approved Loan Amount: _____
Savings Deposit/TD : _____	Less:
Outstanding Loan : _____	Loan Balance : _____
<b>CO-MAKER (1)</b>	CBU (share capital) : _____
Fixed Deposit : _____	Interest : _____
Savings Deposit/TD : _____	(pre-deducted/add-on) : _____
Outstanding Loan : _____	Insurance : _____
<b>CO-MAKER (2)</b>	Service Fee : _____
Fixed Deposit : _____	Mutual Assistance : _____
Savings Deposit/TD : _____	Hospitalization Assistance : _____
Outstanding Loan : _____	Membership : _____
<b>CO-MAKER (3)</b>	Others (ROD) : _____
Fixed Deposit : _____	Net Amount : _____
Savings Deposit/TD : _____	Amortization : _____
Outstanding Loan : _____	Start of Payment: _____ Due: _____
Certified True and Correct:	Remarks: _____

\_\_\_\_\_  
 AO/ Loan Asst./Satellite Head/CCO/OIC



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**FINANCIAL CAPACITY OF THE BORROWER  
(CASH FLOW)**

**CASH RECEIPTS**

Net Salary/Income of Borrower	:	P	_____
Spouse Income/Salary	:		_____
Other Income (specify) _____	:		_____
<b>Total Cash In</b>		<b>P</b>	<b>_____</b>
<b>Less Expenses</b>			
Food	:	P	_____
Utilities	:		_____
Tuition Fees	:		_____
Allowances	:		_____
Contingencies	:		_____
Other Payables	:		_____
<b>Total Expenses</b>		<b>P</b>	<b>_____</b>
<b>Net Cash</b>		<b>P</b>	<b>_____</b>
			_____

I hereby certify to the correctness of the above information.

\_\_\_\_\_  
**Borrower's Printed Name & Signature**

**RECOMMENDING APPROVAL**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Loan Asst./ Satellite Head/OIC/AO

\_\_\_\_\_  
C.I.B.I./Appraiser

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ANALYN B. GARCILIAN**  
Credit and Collection Officer

**APPROVED**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Chief Executive Officer

**BOARD APPROVAL:**  
Resolution Number: \_\_\_\_\_

Reviewed as per BSUCMPC lending/credit policies:

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SAMSON M. OSTING**  
Internal Auditor



**PROMISORY NOTE**

**KNOW ALL MEN BY THESE PRESENTS:**

I, \_\_\_\_\_, single/married/widow to \_\_\_\_\_, both of legal ages, Filipino, and residents of \_\_\_\_\_ (hereafter called the "**Borrower/s**"), and I/We \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ (Co-makers) single/married, all of legal ages, Filipinos, and residents of \_\_\_\_\_, \_\_\_\_\_, after having sworn to in accordance with law, hereby depose and state that:

1. I/WE acknowledge that I/WE have obtained a loan amounting to \_\_\_\_\_ (Php \_\_\_\_\_) from the BENGUET STATE UNIVERSITY AND COMMUNITY MULTIPURPOSE COOPERATIVE (BSUCMPC) at its office located at BSU Compound, Km 5, Balili, La Trinidad, Benguet which shall earn an interest at the rate of (\_\_\_\_%) per annum until fully paid, and payable \_\_\_\_\_ within \_\_\_\_\_ months/\_\_\_\_years;
2. I/WE hereby promise to pay JOINTLY and SEVERALLY to the BSUCMPC the above-stated loan in accordance with the hereto attached Disclosure Statement with Amortization Schedule hereto attached;
3. I/WE shall exclusively use the proceeds of this loan for the purpose/s stated in my/our application;
4. I/WE consent that failure on my/our part to pay two (2) successive monthly dues or interests, violation or non-compliance with any terms and conditions of this NOTE, shall cause this loan, including interest accruing thereon and such other charges and fees, to be due and payable in its entirety;
5. I/WE agree that presentment of payment and notices of dishonor are waived. Holder may accept partial payment/s, but such acceptance shall not operate as waiver of rights and remedies herein granted, and the holder hereof reserves its of recourse against each and all endorsers;
6. Should co-maker assign this note, the liability of co-maker under this note shall be JOINT and SEVERAL;
7. Should it become necessary to collect this NOTE through an Attorney of 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 exclusive of all cost and fees allowed by the law and other loan agreement executed in connection therewith;
8. **In case of default** in the payment of my loan, I/WE further authorize and empower the Cooperative or its successors and assigns, without need of formal notice and irrespective of the date of maturity, to deduct, set off and apply any amount or value from my Savings or Time Deposit Accounts as well as Capital Shares in order to pay, in whole or in part, the amount of my/our loan which became due and demandable;
9. I/WE further expressly submit to the jurisdiction of the proper courts, or in place of execution of this NOTE, as the case maybe, at the option of the Cooperative in the event of litigation arising from this NOTE (Article 137 of RA 9520 shall not be applicable for the purpose of collecting this loan in case of default;



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10. I/we hereby waive confidentiality of our personal information, covered under republic Act 10173 (Data Privacy Act of 2012) and RA 10175 (Cybercrime Prevention Act of 2012) as part of the Cooperative Requirements and I/WE authorize the Coop to conduct such random verification that may be necessary with the credit reference agency, with any Banks, Coops, Financial Institutions and/or Government agencies to determine the veracity of any such information;

11. The content of this document has been read and explained to me/us and I/we have fully understood the same and their consequences.

IN WITNESS WHEREOF, I/we hereunto affix my/our signature/s or thumb mark this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ at \_\_\_\_\_.

\_\_\_\_\_  
Borrower's Printed Name & Signature  
I.D. No<sup>1</sup>. \_\_\_\_\_  
Valid until \_\_\_\_\_

\_\_\_\_\_  
Spouse Printed Name & Signature  
I.D. No. \_\_\_\_\_  
Valid until \_\_\_\_\_

\_\_\_\_\_  
Co-maker's Printed Name & Signature  
I.D. No. \_\_\_\_\_  
Valid until \_\_\_\_\_

\_\_\_\_\_  
Co-maker's Printed Name & Signature  
I.D. No. \_\_\_\_\_  
Valid until \_\_\_\_\_

\_\_\_\_\_  
Co-maker's Printed Name & Signature  
I.D. No. \_\_\_\_\_  
Valid until \_\_\_\_\_

\_\_\_\_\_  
Co-maker's Printed Name & Signature  
I.D. No. \_\_\_\_\_  
Valid until \_\_\_\_\_

**SIGNED IN THE PRESENCE OF:**

\_\_\_\_\_  
Loan Asst./Satellite Head/OIC  
TIN: \_\_\_\_\_

**ANALYN B. GARCILIAN**  
Credit and Collection Officer  
TIN: 297-384-592

\_\_\_\_\_  
Chief Executive Officer  
TIN: \_\_\_\_\_

**ACKNOWLEDGEMENT**

REPUBLIC OF THE PHILIPPINES )  
\_\_\_\_\_) S.S  
\_\_\_\_\_)

**BEFORE ME**, a Notary Public for the Province/City of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ personally appeared the above-named persons exhibiting to me their valid government issued identification cards as competent proof of their identities, known to me and to me known to me to be the same person/s who executed the foregoing instrument and who acknowledged to me that the same is his/her/their own voluntary act and deed and that of the cooperative represented.

The instrument refers to a Promissory Note consists of two (2) pages, signed by the parties and their instrumental witnesses.

**WITNESS MY HAND AND NOTARIAL SEAL** on the date and at the place above stated.

Doc. No.: \_\_\_\_;  
Page No.: \_\_\_\_;  
Book No.: \_\_\_\_;  
Series of \_\_\_\_.

<sup>1</sup> It must be issued by the government (i.e., PRC License, Passport, Gov't Employee I.D., UMID, TIN, Postal, and the like)