



# BENGUET STATE UNIVERSITY AND COMMUNITY MULTIPURPOSE COOPERATIVE

CDA Reg. No. 9520-15000523/ CIN No. 0103150134

BSU Compound, Balili Road, Km5, La Trinidad (2601), Benguet, CAR, Philippines

(074) 619-8354, (074) 248-3036 | Telefax: (074) 422-1846    bsucmpc1999@gmail.com    https://bsucmpc.com/

## LOAN APPLICATION FORM

Application Date: \_\_\_\_\_ Account ID No.: \_\_\_\_\_

### I. BORROWER'S INFORMATION

Name: \_\_\_\_\_  
Last Name First Name Middle Name  
Sex : ☐ Male ☐ Female Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Civil Status : ☐ Single ☐ Married ☐ Separated ☐ Widow ☐ Others: \_\_\_\_\_  
Phone Number : \_\_\_\_\_ Email: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
Permanent Address: \_\_\_\_\_  
Employment Status: ☐ Employed ☐ Self-Employed ☐ Other(s): \_\_\_\_\_  
Occupation: \_\_\_\_\_ Monthly Income/Salary: ₱ \_\_\_\_\_  
Employer/Business Name : \_\_\_\_\_  
Employer/Business Address : \_\_\_\_\_  
Employer/Business Contact No. : \_\_\_\_\_ Email: \_\_\_\_\_  
Length of Service/ Business (in years): \_\_\_\_\_ Other Sources of Income: \_\_\_\_\_

### II. SPOUSE/ IMMEDIATE FAMILY INFORMATION

Name: \_\_\_\_\_  
Last Name First Name Middle Name  
Phone Number: \_\_\_\_\_ Relationship to borrower: \_\_\_\_\_  
Employment Status: ☐ Employed ☐ Self-Employed ☐ Other: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Employer/Business Name : \_\_\_\_\_  
Employer/Business Address : \_\_\_\_\_  
Employer/Business Contact No : \_\_\_\_\_ Email: \_\_\_\_\_  
Length of Service/ Business (in years): \_\_\_\_\_ Other Sources of Income: \_\_\_\_\_

\_\_\_\_\_  
Signature over Printed Name of Spouse/Partner

### III. LOAN AND DEPOSITS INFORMATION

Loan Purpose : \_\_\_\_\_ Loan Window: \_\_\_\_\_  
(For Coop Staff Only)  
Loan Amount : \_\_\_\_\_ (₱ \_\_\_\_\_)  
Amount in words Amount in digits  
Terms : \_\_\_\_\_ months / \_\_\_\_\_ years Interest Rate: \_\_\_\_\_ % per annum  
Mode of Payment: ☐ Monthly ☐ Quarterly ☐ Semi-Annual ☐ Lumpsum (for short term or Back-to-Back Loans only)  
Loan Securities: ☐ Deposits ☐ Comaker ☐ Salary Deduction ☐ REM ☐ Others, specify: \_\_\_\_\_

If comaker, fill-out the following information. Comakers must be members of BSUCMPC.

Name of Comaker	Contact No.	Address	Total Deposits	Total Loan Balance	Signature
			₱	₱	
			₱	₱	
			₱	₱	

#### Deposits in the Cooperative:

	Fixed Deposit	Savings Deposit	Time Deposit	Total Deposit
Amount: ₱	₱	₱	₱	₱

#### Existing Loans:

Loan Window	Total Loan Amount	Paid-up Loan Amount	Outstanding Balance
	₱	₱	₱
	₱	₱	₱
	₱	₱	₱
Total Outstanding Loan Balance:			₱

\_\_\_\_\_  
Signature over Printed Name of Borrower

IV. CASH FLOW STATEMENT

MONTHLY INCOME	
Source of Income	Amount
Salary/Wages	₱
Salary/Wages (Spouse)	₱
Business Income	₱
Rental Income	₱
Others, specify:	
a. _____	₱ _____
b. _____	₱ _____
c. _____	₱ _____
Total Monthly Income:	₱

MONTHLY EXPENSES	
Expenses	Amount
Rental	₱
Utilities	₱
Food & Groceries	₱
Education	₱
Others, Specify:	
a. _____	₱ _____
b. _____	₱ _____
c. _____	₱ _____
Total Monthly Expenses:	₱

NET CASH FLOW (Monthly Income less Monthly Expenses): ₱ \_\_\_\_\_

DATA PRIVACY CONSENT STATEMENT:

I have read and understood the **Cooperative’s Data Privacy Statement**, and I hereby give my informed consent to **BSUCMPC** to *collect, record, organize, update, retrieve, consult, use, consolidate, store, block, erase, or otherwise process* my personal data for legitimate purposes in relation to my membership and transactions with the Cooperative. I further understand that this consent is without prejudice to the Cooperative’s right to process my personal data under other lawful bases provided by the **Data Privacy Act of 2012** and applicable laws. This consent likewise does not constitute a waiver of any of my rights as a data subject under said laws.

I hereby certify that the above information is true and correct to the best of my knowledge. I authorize BSUCMPC to verify any or all information herein and deduct from my share capital/savings for any unpaid obligations. I agree to abide by the policies, rules, and regulations of the Cooperative:

\_\_\_\_\_  
Signature over Printed Name of Borrower

Valid ID & No.: \_\_\_\_\_

Date Signed : \_\_\_\_\_

In case of emergency, please contact: Name : \_\_\_\_\_  
(must be immediate family member) Relationship : \_\_\_\_\_  
Contact Nos. : \_\_\_\_\_

V. INITIAL ASSESSMENT

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

\_\_\_\_\_  
Loan Assistant/AO/Satellite Head

VI. EVALUATION & RECOMMENDING APPROVAL

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

\_\_\_\_\_  
Credit & Collection Officer/Loan Officer/Satellite Head

VII. APPROVAL

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

\_\_\_\_\_  
**RACHEL S. PETERO**  
Chief Executive Officer

Board Approval, if applicable: Resolution No. : \_\_\_\_\_  
Date Approved : \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS:

I, \_\_\_\_\_, single/married/widow  
to \_\_\_\_\_, both of p 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;
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.: \_\_\_\_\_  
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: \_\_\_\_\_

\_\_\_\_\_  
*Credit and Collection Officer*  
TIN: 941765-977

**RACHEL S. PETERO**  
*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)



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## IX. ASSIGNMENT OF SHARE CAPITAL/SAVINGS DEPOSIT AND/OR TIME DEPOSIT

I/We, the undersigned, for and in consideration of the loan obtained by me/us from the BSU and Community Multipurpose Cooperative, in the amount of \_\_\_\_\_ Pesos (P \_\_\_\_\_) as evidence by the Promissory Note executed by me/us, do hereby assign in favor of the said Cooperative all my/our deposits, whether term or savings deposits, time deposits and including share capital, which I/We now have or hereafter may have.

Accordingly, I/We hereby agree not to withdraw said deposits or any part thereof as long as the said Loan together with its interest and penalty remain unpaid.

Therefore, I/We, jointly and severally, empower and authorize the said Cooperative at their option and without notice to set off or apply to the payment of my/our aforementioned loan together with its Interest and penalty, in the event of my/our failure to pay the same after its maturity and without necessary of prior demand.

In Witness Whereof, I/We have hereunto signed our name/s this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ at \_\_\_\_\_ Philippines.

\_\_\_\_\_

*Name & Signature of Borrower/Maker*

\_\_\_\_\_

*with Marital Consent*

\_\_\_\_\_

*Name & Signature of Co-Borrower/Co-Maker*

\_\_\_\_\_

*Name & Signature of Co-Borrower/Co-Maker*

\_\_\_\_\_

*Name & Signature of Co-Borrower/Co-Maker*

### INSURANCE WAIVER

Date of Birth: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_

### DECLARATION OF WAIVER:

I acknowledge that I have been offered loan insurance by Benguet State University and Community Multipurpose Cooperative through an insurance service provider. I choose not to enroll my loan amounting to PHP \_\_\_\_\_ payable within [ \_\_\_\_\_ month/ \_\_\_\_\_ years]. I understand that under any circumstances, I will not hold the company liable for any financial matters related to this waiver. I declare this waiver for myself, by signing this waiver, I fully affirm that the company has taken all reasonable and practical actions to insure my loan as a member of this cooperative.

\_\_\_\_\_

*Printed name & signature*

\_\_\_\_\_

*Date*