



Bureau of Jail Management and Penology
Provident Fund

144 Mindanao Ave, Bahay Toro, Quezon City
Tel. (02) 927-6383 Loc. 312
09270169428/09083028298



APPLICATION FOR LOAN

Application No.: _____
Date Received : _____

PLEASE CHOOSE ONE: ☐ For Pick-up
☐ For Deposit

LBP ACCOUNT NO: _____

TYPE OF LOAN: _____REGULAR _____EMERGENCY _____OTHERS _____ (please specify)
STATUS : _____NEW LOAN _____RENEWAL
TERMS : _____months

Sir/Madam:
The undersigned, a member of BJMP Provident Fund, hereby request for a Salary Loan in the amount of _____ (P _____) under the terms and conditions stipulated in the Promissory Note at the back hereof.

The following documents are submitted for your evaluation namely:
1. Latest payslip with Net Take Home Pay (NTHP), of at least P _____ and
2. BJMP Provident Fund/BJMP Identification Card (Photocopy Front and Back of ID)

PURPOSE OF LOAN: (Please check)
() Livelihood () Health/Medical Needs () House Improvement
() Education () Augmented Family Income () Others: _____

*NAME (Last, First, Middle): _____ *Date of Birth: _____ *Age: _____

*RANK: _____ *DESIGNATION: _____ *PRESENT UNIT ASSIGNMENT & ADDRESS: _____

*RESIDENTIAL/PROVINCIAL ADDRESS: (Indicate house number, street, city/municipality) _____

*CONTACT NO. (Mobile/Landline): _____

*NAME OF SPOUSE/BENEFICIARY AND ADDRESS: _____

(RANK/NAME/SIGNATURE OF BORROWER)

(Please **DO NOT** fill up beyond this line)
BORROWING CAPACITY (Loan Amount is computed based on one's capacity to pay or Net Take Home Pay (NTHP))

PRINCIPAL AMOUNT	P_____	Processed by:	Recommending Approval:
LESS:			
NOTARIAL FEE	P_____	_____	<u>JO2 Jenifer Rovy R Zaragoza</u>
MEMBERSHIP FEE	P_____	Loan Processor	Loan Officer
1 st CAPCON	P_____		
INSURANCE PAYABLE	P_____		
LOAN BALANCE	P_____		
BANK CHARGE	P_____		
NET PROCEEDS	P_____		

CERTIFICATIONS

I hereby certify that the applicant is not due for separation during the terms of his/her loan.	I hereby certify that the applicant has <input type="checkbox"/> No pending case <input type="checkbox"/> With pending case	I hereby undertake to deduct the amount indicated in the authorization and remit the same to the BJMP Provident Fund and to inform them of any change in the pay status of the borrower and shall issue no clearance no clearance until the obligation/s is fully paid and with their written conformity.
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_____ Personnel Officer Signature over Printed Name	_____ Legal Officer Signature over Printed Name	_____ Finance Officer Signature over Printed Name
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PROMISSORY NOTE

LOAN AMOUNT: P_____, 20__

FOR VALUE RECEIVED, I PROMISED TO PAY TO THE DEMAND OF THE BUREAU OF JAIL MANAGEMENT AND PENOLOGY PROVIDENT FUND, THE SUM OF _____ PESOS (P_____) PHILIPPINE CURRENCY WITH INTEREST OF _____ PERCENT (_____%) PER ANNUM.

In case of non-payment and this notice is referred to a lawyer for collection, I agree to pay a reasonable amount for attorney’s fees and in the case of judicial suit for collection, to pay the Association all the outstanding amount, in addition to the cost of the suit and/or other incidental expenses;

I hereby authorize and empower the BJMP Provident Fund at its option at any time, without notice to pay, apply to the payment of this loan any or all moneys, securities and things of value which may hereafter be in its hands or deposits or otherwise to the credit of or belonging to me, and the Association is hereby authorized to sell at public or private sale such securities, or things of value for the purpose of applying the proceeds thereof to such payments;

I further agree in case of separation from the service/employment of whatever causes, that the unpaid balance, with its accumulated interest and such surcharges stipulated above, be deducted from my last payment, commutation of leave, refunds and/or from my pensions;

If after one (1) month no deduction has been effected on my payslip, I will call/inform BJMP Provident Fund office. I will personally pay the amortization/s not deducted from my payslip. Finally, I hereby authorize and empower BJMP Provident Fund to assign to any financial institutions this PN without the need of prior notice to the undersigned principal borrower.

* _____
Signature over Printed Name of Borrower

AUTHORIZATION FOR PAYROLL/PENSION DEDUCTION AND REMITTANCE

TO WHOM IT MAY CONCERN:

I hereby authorize the deduction from my payroll/pension and remittance of the amount _____ pesos (P_____) every month beginning _____, 20__ for payment of my obligation with the BJMP Provident Fund until the same obligation will be fully paid. This authorization shall not be rescinded without the conformity in writing of the BJMP Provident Fund. If the amount is not deducted and/or remitted by my Finance Officer, I oblige to accelerate my payments to pay it personally and to update my accounts while the obligation is still subsisting.

IN CASE I AM SEPARATED FROM MY PRESENT EMPLOYMENT BEFORE THE FULL PAYMENT OF MY LOAN, I SHALL PAY THE BALANCE, INTEREST, FEES AND COSTS TO THE BJMP PROVIDENT FUND. I AUTHORIZE MY FINANCE OFFICER TO DEDUCT FROM MY PENSION/ALLOWANCE/BENEFITS AND I WAIVE MY RIGHTS UNDER R.A. 2310 AND RULE 39, NEW RULES OF COURT AMENDED. IF MY RETIREMENT PAY COMES FROM THE GOVERNMENT OR PRIVATE OFFICE, I LIKEWISE AUTHORIZE MY FINANCE OFFICER TO DEDUCT AND REMIT THE ACCOUNTS OUTSTANDING TO THE BJMP PROVIDENT FUND.

* _____
Signature over Printed Name of Borrower

☐ APPROVED ☐ DISAPPROVED

FOR THE BOARD OF DIRECTORS:

Notary Public

DIR. MARCOS B VILLALON, CES (E)
Chief Operations Officer