



Manuel Guianga and Sirib Growers and Employees Multipurpose Cooperative (MAGSIGE MPC)

Prk. 13, Villafuerte St., Calinan, Davao City
Tel Nos. (082) 324-1569/(082) 297-4661/09489993459/09178525231

Member Application No. _____

Date of Application: _____

HAYOP SA ASENSO LOAN APPLICATION FORM

PERSONAL DATA

Name: _____	Share Capital: _____
Address: _____	Savings: _____
Age: _____	Salary Net: _____
Birth Date: _____	No. of years as member: _____
Civil Status: _____	Contact No. : _____
Gender: _____	Credit Rating: _____
Educational Level: _____	Name of Spouse: _____
Occupation: _____	Occupation of Spouse: _____
Area of Assignment: _____	No. of Children: _____
Status of Residence: <input type="checkbox"/> RENTED <input type="checkbox"/> OWNED <input type="checkbox"/> OTHERS: specify _____	

EMPLOYMENT

Position: _____
Employer: _____
Address: _____
Date Employed: _____
Monthly Salary: _____

BUSINESS

Type of Business: _____
Business Name: _____
Address: _____
Contact No. _____
Monthly Income: _____

MEMBER'S ASSET

Value of Residence: _____
Vehicle Owned: _____
Real Estate Property: _____
Other Valuables: _____

MEMBER'S MONTHLY INCOME

Salary: _____
Spouse Income: _____
Business: _____
Other Income: _____

MONTHLY EXPENSES

Food: _____
Utilities (light bill,water bill,etc.) _____
Education: _____
Transportation: _____
Others: _____

OTHER EXPENSES

Housing: _____
Vehicle Fuel & Maint. _____
Other Expenses: _____
MAGSIGE MPC LOANS: _____

UNDERTAKINGS

I, the loan applicant on record, together with my co-maker wish to avail a loan from MAGSIGE MPC under the following terms and conditions:

LOAN TYPE: _____
LOAN AMOUNT: _____
LOAN PURPOSE: _____

TERM OF PAYMENT: _____
SECURITIES OFFERED: _____

In this regard, I/We hereby authorize and grant consent to MAGSIGE MPC to obtain any information required relative to my credit and to disclose to an credit bureaus, reporting agency, business or persons with whom I have financial dealings as may be required by law. I/We jointly and severally agree to indemnify and save MAGSIGE MPC from any and all claims in damages or otherwise arising from any disclosure.

Signature over printed name of borrower

Name and Signature of Spouse

Name and Signature of Co-maker

Name and Signature of Co-maker

PROCESSED BY: _____	RECOMMENDING APPROVAL _____	APPROVAL: _____
Loan Processor	Loan Officer/Satellite Manager	Loan Manager/CEO

CRECOM APPROVAL

Chairperson

Member

Member

SALARY DEDUCTION AUTHORITY

This is to authorize the deduction from my semi-monthly salaries the amount in the computed amortization of the approved loan amount in this application, representing my loan payment to MAGSIGE MPC. This Authority is deemed null and void after the last salary deduction date is effected or after my loan with MAGSIGE MPC is fully paid.

Name and signature of borrower

Date