



BUREAU OF JAIL MANAGEMENT AND PENOLOGY SAVINGS AND LOAN ASSOCIATION, INC.

(Authorized by the Bangko Sentral ng Pilipinas)

G/F Building 2, BJMPMBAI Corporate Office, Brgy. Culiati, Congressional Ave Extension, Quezon City (Main Office)

141 Mindanao Avenue, Brgy. Bahay Toro, Project 8, 1106 Quezon City (Annex Office)

Tel. Nos. 09178587163/ 09420259732 / 09279710069 loc 104; BJMPSLAI FB Messenger, BJMPSLAI.ph

LOAN APPLICATION

ATTACHMENT: **1. Copy of BJMP pay slip and ID** **2. Front of LBP ATM (SA#)**

Loan Purpose <input type="checkbox"/> Appliance/Furniture/Equipment <input type="checkbox"/> Travel and tour <input type="checkbox"/> Medical <input type="checkbox"/> Car Purchase/Repair <input type="checkbox"/> Home Improvements <input type="checkbox"/> Business _____ <input type="checkbox"/> Education/Tuition Fee <input type="checkbox"/> Others _____	Loan Term (number of months to pay). Please choose: <input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 Amount applied for in words (P _____) <p style="text-align: right;">(PESOS)</p>
Release of loan proceeds: choose one <input type="checkbox"/> Check <input type="checkbox"/> LBP ATM	LBP SAVINGS ACCOUNT NO.

BORROWER'S DATA

Last Name	First Name	Extension Name (Sr, Jr, II)	Middle Name
Date of Birth (mm-dd-yy)	Age	Place of Birth	Gender:
E-mail Address:		FB Messenger:	
Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widower <input type="checkbox"/> Separated		Contact No.	REMARKS (FOR BJMPSLAI USE ONLY)
Complete Office Address/Unit Assignment			
Complete Permanent Home Address			
Complete Provincial Address			

BJMPSLAI upholds an individual's data privacy rights and observes that all personal information, sensitive personal information and privileged information collected and to be collected are processed or recorded, managed, organized, stored, updated, retrieved, consolidated, used, blocked, and erased according to the Data Privacy Act of 2012 (Republic Act 10173), its Implementing Rules and Regulations (IRR), and various Circulars under the principles of transparency, legitimate purpose, and proportionality.

I hereby give my consent to the processing, sharing, and/or transferring of my personal data relating to my account/s, without notice, to BJMPSLAI, its service providers and entities or third parties having authority or right to such disclosure of information as in the case of regulatory agencies, governmental or otherwise, which have required such disclosure from BJMPSLAI, also to enable BJMPSLAI to service my account/s, to process my requests and transactions with it, to provide all existing features and future enhancements thereto, and to avail other BJMPSLAI products, services, and facilities, as the BJMPSLAI deems necessary. **I agree to hold BJMPSLAI, and third-party service providers free and harmless from any liability arising from or in connection with the consent herein given.**

Signature over printed name of the borrower

Date

PLEASE DO NOT WRITE BELOW THIS LINE (For BJMPSLAI use only)

CERTIFICATIONS

I hereby certify that the applicant is <input type="checkbox"/> not due for separation in the near future <input type="checkbox"/> due for separation in the near future <p style="text-align: center;">_____ DPRM</p>	I hereby certify that the applicant is: <input type="checkbox"/> not subject to initial investigation <input type="checkbox"/> subject to initial investigation <p style="text-align: center;">_____ DIP</p>	I hereby certify that the applicant: <input type="checkbox"/> has no pending administrative case <input type="checkbox"/> has pending administrative case <p style="text-align: center;">_____ LEGAL</p>	I hereby undertake to deduct and collect from the BJMP payroll the amount of monthly amortization on this loan and remit the same to the BJMPSLAI and abide with other related stipulations as provided in the MOA between BJMP and BJMPSLAI <p style="text-align: center;">_____ CHIEF, FINANCE SERVICE</p>
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RECOMMENDATION AND APPROVAL

Maximum Loanable Amount	Recommended Principal Amount	Mo. Amortization	Term	Start of Mo. Amortization	Net Pay after Deduction
Processed by:			Reviewed by:		
_____ <i>Loan Processor's Signature Over Printed Name</i>			_____ <i>Loans Head's Signature Over Printed Name</i>		
Approved by the BOT Authorized Representative:					
_____ <i>VP and General Manager</i>					

PROMISSORY NOTE

_____ Date

FOR VALUE RECEIVED, I PROMISE TO PAY THE BUREAU OF JAIL MANAGEMENT AND PENOLOGY SAVINGS AND LOAN ASSOC., INC (BJMPSLAI), WITH OFFICE LOCATED AT 144 MINDANAO AVENUE, BARANGAY BAHAY TORO, PROJECT 8, QUEZON CITY, THE SUM OF _____ PESOS (₱ _____) PHILIPPINE CURRENCY, WITH INTEREST OF _____ percent (____%) PER ANNUM PAYABLE FOR _____ MONTHS AT A MONTHLY AMORTIZATION OF ₱ _____, TO MATURE ON _____, 20_____.

I agree to pay the amount due including additional interest at the rate above stated and charges on all monthly amortizations that are defaulted or delayed, be it intentional or not without further need of notice or demand.

I hereby authorize BJMPSLAI to amend the amount of my amortization and the number of payments without prior notice in case of non-payment, short payment and/or early payment of the loan. In case I defaulted or failed to pay any of the amortizations on the indebtedness or the interest when due, the entire principal plus the interest that has so far accrued shall immediately become due and payable without need of notice of demand and I agree to pay any outstanding amount due, compounded monthly until fully paid. In which case, I hereby authorize and empower BJMPSLAI even without prior notice, to collect any money, securities or things of value which may be in its hands or otherwise to the credit of or belonging to me for the purpose of applying their proceeds as payment of this loan.

In case of no payment and this note is referred to a lawyer/collection agency for collection, I agree to pay in addition to and based on the outstanding amount due and the cost of the suit, attorney's fees, as well as other necessary and incidental expenses.

If after one (1) month no deduction has been effected on my pay slip, I will call/inform BJMPSLAI office. I will personally pay the amortization/s not deducted from my pay slip. In any case, however, surcharge for non-payment will be imposed.

I further agree that in case of separation from the service for whatever cause, the unpaid balance including its accumulated interest and surcharges as stipulated above, shall be deducted from my last payment, commutation of leaves, furlough, pension and all other separation benefits and thereby waive my rights under applicable rules.

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 ₱ _____ every month beginning _____, 20_____ for payment of my obligation with BJMPSLAI until the same obligation will be fully paid. This authorization shall not be rescinded without the conformity in writing of the BJMPSLAI. If the amount is not deducted and/or remitted by the Finance Officer, I shall pay the delinquent accounts anytime 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 BJMPSLAI. I ALSO **VOLUNTARILY AUTHORIZE**, THROUGH A SPECIAL POWER OF ATTORNEY (SPA), THE BJMP FINANCE OFFICER TO DEDUCT ANY OUTSTANDING LOAN BALANCE FROM MY PENSION ALLOWANCE/BENEFITS, SEPARATION PAY, GRATUITY PAY, AND OTHER RETIREMENT BENEFITS, AND SUCH OTHER BENEFITS, SUBJECT TO APPLICABLE LAWS, RULES, AND REGULATIONS, AND REMIT THE ACCOUNTS OUTSTANDING WITH THE BJMPSLAI, AND THEREBY WAIVED MY RIGHTS UNDER RA 2310 AND RULE 39, AND OTHER PERTINENT LAWS, AND THE RULES OF COURT. IN THE EVENT THAT THE AFOREMENTIONED BENEFITS ARE NOT SUFFICIENT TO SETTLE THE OUTSTANDING LOAN BALANCE OR THE BJMP FINANCE OFFICE FAILS FOR WHATEVER REASON TO DEDUCT THE SAME FROM MY SALARY/SEPARATION/RETIREMENT BENEFITS, I HEREBY AUTHORIZE THE BJMPSLAI TO APPLY WHATEVER BENEFITS ARE DUE TO ME (e.g. *CAPITAL CONTRIBUTION, SAVINGS DEPOSITS*), TO SETTLE SAID OBLIGATION.

CERTIFICATION

KNOW BY ALL MEN BY THESE PRESENTS

That the loan is covered by Credit Group Life Insurance (CGLI) by virtue of his/her compliance of the provision of this MRI for his/her loan granted on _____ in the amount of PESOS (₱ _____) and in the event the insurance pays the unpaid loan or a portion thereof, I _____ obligate myself to pay the outstanding balance to the BJMPSLAI. I HEREBY AUTHORIZE THE Chief, BJMP Finance Service Office to pay BJMPSLAI any amount due from the BJMP on account of my separation from the service to the extent of the amount of the unpaid loan or a portion thereof.

Signature over printed name of the borrower

Date

TERMS AND CONDITION

- Maximum amount of total loan** – shall not exceed twelve (12) times of the borrower's total earnings or retirement pension from employment as shown on the latest pay slip, plus annual regular bonuses/incentives and plus amount deposited or contributed by the member-borrower.
- Due date of the first monthly installment** – shall be on the first day of the following month after granting the loan and every month thereafter until the loan is fully paid.
- Interest rate** – shall be computed using the diminishing balance method.
- Maturity of the loan** – shall automatically matures upon the death of the borrower notwithstanding that a longer term was chosen by the borrower. Upon the maturity of the loan, the entire principal amount on this loan including all interest and other charges, shall be due and payable without the need of demand or further notice, all of which are hereby expressly waived by the borrower.
- Authority to apply payment** – in case of maturity of this loan due to death of the borrower and it remains outstanding either in whole or in part, both for principal and interest, the **BJMPSLAI is authorized to apply survivor's benefit** due to his/her beneficiaries, the amount equivalent to the outstanding balance of this loan, inclusive of interest, penalties and surcharges. Further, in the event that the survivor's benefit is insufficient to fully settle the outstanding obligation, BJMPSLAI is authorized to apply the monthly survivorship pension (basic survivorship pension and dependent's pension) due to the qualified survivorship/s to the remaining outstanding obligations until the loan is fully paid. Such authorization shall remain effective until full payment of the loan or any other outstanding obligations of the borrower to the BJMPSLAI, by virtue of this loan and/or other obligation constitute a lien over any benefits/claims that may be due the borrower.
- Pre-termination penalty (10%)** – In the event that the borrower decide to pre-terminate his/her contracted loan, he will be charged with a pre-termination fee of 10% of the outstanding principal and any interest due.

Subscribed and sworn to before me this _____ day of _____ 20_____.

NOTARY PUBLIC

Doc No. _____ :
Page No. _____ :
Book No. _____ :
Series of _____ :

SPECIAL POWER OF ATTORNEY

REPUBLIC OF THE PHILIPPINES)
Quezon City) SS

KNOW ALL MEN BY THESE PRESENTS:

I, _____, of legal age, married/single, a resident of _____, do hereby name, constitute and appoint **the Chief, Bureau of Jail Management and Penology (or BJMP) Finance Service Office, or his duly authorized representative**, with office address at 144 BJMP Bldg., Mindanao Avenue, Quezon City, as my true and lawful Attorney-in-fact to act for and in my name and represent me, in case I am separated from my employment before the maturity of my loan from the **BUREAU OF JAIL MANAGEMENT AND PENOLOGY Savings and Loan Association, Inc.**, to process the deduction of my outstanding balance from the benefits that I am entitled to receive, and whatever funds and benefits due in my favor - such as, but not limited to my retirement pay/gratuity pay, pension, and other benefits from the government or private institutions - and remit the accounts outstanding with the *BJMP Savings and Loan Association, Inc.*

I hereby grant my **representative irrevocable** full power and authority to execute and perform every act necessary to render effective the power as though I myself have so performed it and hereby approving all that he/she may do by virtue of these presents.

In witness whereof, I hereunto set my hand this ___ day of _____, 20__ at Quezon City, Philippines.

**Signature over Printed Name
of Principal/Borrower**

WITNESSES:

Signature over Printed Name

Signature over Printed Name

ACKNOWLEDGEMENT

BEFORE ME, a Notary Public, for and in the above jurisdiction, personally appeared on _____ of _____, 20__, the following persons:

Name	Identification	Date and Place of Issuance
_____	_____	_____
_____	_____	_____

known to me to be the same persons who executed the foregoing instrument and they acknowledged to me that the same is their own free and voluntary act and deed.

WITNESS my hand and seal on date and at the place written above.

SPECIAL POWER OF ATTORNEY

REPUBLIC OF THE PHILIPPINES)
Quezon City) SS

KNOW ALL MEN BY THESE PRESENTS:

I, _____, of legal age, married/single, a resident of _____, do hereby name, constitute and appoint **the Chief, Bureau of Jail Management and Penology (or BJMP) Finance Service Office, or his duly authorized representative**, with office address at 144 BJMP Bldg., Mindanao Avenue, Quezon City, as my true and lawful Attorney-in-fact to act for and in my name and represent me, in case I am separated from my employment before the maturity of my loan from the **BUREAU OF JAIL MANAGEMENT AND PENOLOGY Savings and Loan Association, Inc.**, to process the deduction of my outstanding balance from the benefits that I am entitled to receive, and whatever funds and benefits due in my favor - such as, but not limited to my retirement pay/gratuity pay, pension, and other benefits from the government or private institutions - and remit the accounts outstanding with the *BJMP Savings and Loan Association, Inc.*

I hereby grant my **representative irrevocable** full power and authority to execute and perform every act necessary to render effective the power as though I myself have so performed it and hereby approving all that he/she may do by virtue of these presents.

In witness whereof, I hereunto set my hand this ___ day of _____, 20__ at Quezon City, Philippines.

**Signature over Printed Name
of Principal/Borrower**

WITNESSES:

Signature over Printed Name

Signature over Printed Name

ACKNOWLEDGEMENT

BEFORE ME, a Notary Public, for and in the above jurisdiction, personally appeared on _____ of _____, 20__, the following persons:

Name	Identification	Date and Place of Issuance
_____	_____	_____
_____	_____	_____

known to me to be the same persons who executed the foregoing instrument and they acknowledged to me that the same is their own free and voluntary act and deed.

WITNESS my hand and seal on date and at the place written above.

AFFIDAVIT OF CONSENT

I hereby acknowledge that I owe **BJMP Savings and Loan Association, Inc. (BJMPSLAI)** the outstanding loan balance in the amount of ₱_____ including all accrued interest and other charges to date. I hereby give my consent to **BJMP Finance Service** that upon separation from the service at the **Bureau of Jail Management and Penology (BJMP)** pay my outstanding loan balance to **BJMPSLAI** from the proceeds of my benefits that I am entitled to receive such as lump sum retirement benefits, terminal leave benefits, and whatever funds and benefits due in my favor.

Signed this ____ day of _____, 20__ at Quezon City.

**Signature over printed name
Debtor**

Subscribed and sworn to before me this ____, day of _____, 20____, at Quezon City, Metro Manila, by the affiant who exhibited to me his/her _____ identification card with numbers _____ showing his/her photograph and signature.

WITNESS MY HAND AND SEAL, on the date and place first above written.

Notary Public

Doc. No. _____
Page No. _____
Book No. _____
Series of 20 _____