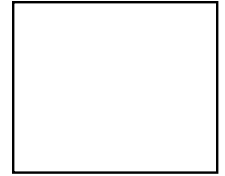


**ATHENA CREDIT, INC.**

Unit 904 The Centerpoint Building  
Julia Vargas Avenue corne Garnet  
Road, Ortigas Pasig City  
Tel. No. (8)634-6327; Cell No. 0917-885-2374



**LOAN APPLICATION FORM**

Amount Applied P \_\_\_\_\_

Purpose \_\_\_\_\_ Term:  6 mos.  1 year  18 mos.  2 years  3 years

Name of Borrower \_\_\_\_\_ Date of Birth \_\_\_\_\_ Civil Status \_\_\_\_\_

City Res. Address \_\_\_\_\_ Contact No. \_\_\_\_\_

Provincial Address \_\_\_\_\_ No. of Dependents: \_\_\_\_\_

SSS No. \_\_\_\_\_ TIN No. \_\_\_\_\_

Employer's Name \_\_\_\_\_ Office Tel. No. \_\_\_\_\_

Business Address \_\_\_\_\_

Date Hired \_\_\_\_\_ Position / Job Status \_\_\_\_\_

Gross Monthly Income/Salary \_\_\_\_\_ Net Monthly Income/Salary \_\_\_\_\_

Name of Spouse (If Married) \_\_\_\_\_ Office Telephone No. \_\_\_\_\_

Employer's Name/Address \_\_\_\_\_

Gross Monthly Income/Salary \_\_\_\_\_ Net Monthly Income/Salary \_\_\_\_\_

Estimated Monthly Expenses of Borrower:

Tuition \_\_\_\_\_ House Rental \_\_\_\_\_ Electric Bill \_\_\_\_\_ Phone \_\_\_\_\_ Transpo. \_\_\_\_\_

Other Loans/Credit Obligations:	Name	Amount	Mo.	Amort. O/S Balance
*Banks/Finance Company	_____	_____	_____	_____
*Credit Cards	_____	_____	_____	_____
*Others	_____	_____	_____	_____

Name of Co-maker \_\_\_\_\_ Date of Birth \_\_\_\_\_ Civil Status \_\_\_\_\_

City Res. Address \_\_\_\_\_

Provincial. Address \_\_\_\_\_ Contact No. \_\_\_\_\_

Employer's Name/Address \_\_\_\_\_ Office Tel. No. \_\_\_\_\_

SSS No. \_\_\_\_\_ TIN No. \_\_\_\_\_

Date Hired \_\_\_\_\_ Position/Job Status \_\_\_\_\_

Gross Monthly Income/Salary \_\_\_\_\_ Net Mo. Income/Salary \_\_\_\_\_

Already Co-maker of \_\_\_\_\_ ( ) Paid ( ) Balance \_\_\_\_\_

\_\_\_\_\_ ( ) Paid ( ) Balance \_\_\_\_\_

\_\_\_\_\_ ( ) Paid ( ) Balance \_\_\_\_\_

**INSTRUCTIONS/AGREEMENT :**

- A. For Applicant:
- 1 Application Form 1 duplicate, Promissory Note, Authority to debit should be fully accomplished 2 duplicate.
  - 2 Co-maker should be at least 2 years in service; permanent co-employee with the same or greater salary.
  - 3 Re-availment may be allowed only after at least half of the term of the loan has expired or under monitorious reasons to be determined by the credit committee.
  - 4 To be eligible as borrower, an employee, unless later on amended, must have been in service for at least 1 year. Any deviation on this requires approval of the Credit Committee.
  - 5 It is understood that, as a manner of paying this loan, applicant authorizes Athena Credit, Inc. to deduct the corresponding amortization ( ) twice a month ( ) monthly from applicant's salary.
  - 6 In case of resignation/retirement from the job while the loan is still outstanding, applicant authorizes the employer to assign, in behalf of the Athena Credit, Inc. any benefit/amount that may be due to borrower for purposes of paying the loan
  - 7 As a guide in evaluating the loan application, **xerox copies of latest pay slip/office ID of BOTH Applicant and the Co-maker** must be attached with application from to be submitted to Athena Credit, Inc.
- B. For applicant's employer, submit Art. of Incorporation, Latest Audited Financial Statement, List of Directors/Officers.

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

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Co-maker

(Signature over printed name)

(Signature over printed name)

Endorsed by Immediate Supervisor :

\_\_\_\_\_  
(Signature over printed name & designation)

Information & signatures provided are certified true & correct :

(exclusions, if any: )

\_\_\_\_\_  
(Human Resource designated signatory)

(Signature over printed name & designation)

Recommended by :

Approved by:

\_\_\_\_\_  
( ) GM ( ) Credit Com. ( ) Board