



CALAMITY LOAN APPLICATION FORM (CLAF)

HQP-SLF-066
(V08, 09/2023)

INSTRUCTIONS:

- 1. Accomplish this form in one (1) copy only. Print this form back to back on one single sheet of paper.
- 2. Type or print all entries in BLOCK or CAPITAL LETTERS.
- 3. All data fields are mandatory. Otherwise, put N/A if not applicable.

LAST NAME		FIRST NAME		NAME EXTENSION (e.g., Jr., II)		MIDDLE NAME		MAIDEN MIDDLE NAME (for married women)		NO MIDDLE NAME (check if applicable only) <input type="checkbox"/>		DATE OF BIRTH		PLACE OF BIRTH	
COMPLETE MOTHER'S MAIDEN NAME				NATIONALITY		SEX <input type="checkbox"/> Male <input type="checkbox"/> Female		MARITAL STATUS <input type="checkbox"/> Single/Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Widow/er <input type="checkbox"/> Legally Separated <input type="checkbox"/> Annulled				CITIZENSHIP		EMAIL ADDRESS	
PRESENT HOME ADDRESS <i>Unit/ Room No., Floor Building Name Lot No., Block No., Phase No. House No.</i>												CELL PHONE NUMBER		HOME TELEPHONE NUMBER	
<i>Street Name</i>		<i>Subdivision</i>		<i>Barangay</i>		<i>Municipality/City</i>		<i>Province/State/Country (if abroad)</i>		<i>ZIP Code</i>		APPLICANT'S TAXPAYER IDENTIFICATION NUMBER (TIN)		SSS/GSIS NO.	
PERMANENT HOME ADDRESS <i>Unit/Room No., Floor Building Name Lot No., Block No., Phase No. House No.</i>												BUSINESS TELEPHONE NUMBER (049)549-3030		NATURE OF WORK	
<i>Street Name</i>		<i>Subdivision</i>		<i>Barangay</i>		<i>Municipality/City</i>		<i>Province/State/Country (if abroad)</i>		<i>ZIP Code</i>		NAME OF TYPHOON/CALAMITY		DESIRED LOAN AMOUNT MAX	
EMPLOYER/BUSINESS NAME DENSO PHILIPPINES CORPORATION												LOAN TERM <input type="checkbox"/> Two (2) Years <input type="checkbox"/> Three (3) Years		SOURCE OF FUND	
EMPLOYER/BUSINESS ADDRESS <i>Unit/Room No., Floor Building Name Lot No., Block No., Phase No. House No. Street Name</i> 109 UNITY AVE CARMELRAY IND'L PARK 1 CANLUBANG												LOAN PURPOSE Non-Housing Related <input type="checkbox"/> Home Enhancement <input type="checkbox"/> Tuition/Educational Expense <input type="checkbox"/> Health and Wellness <input type="checkbox"/> Livelihood Housing Related <input type="checkbox"/> House Repair <input type="checkbox"/> Minor home improvement <input type="checkbox"/> Others, <i>please specify</i>			
<i>Subdivision</i>		<i>Barangay</i>		<i>Municipality/City</i>		<i>Province/State/Country (if abroad)</i>		<i>ZIP Code</i> 4037							
EMPLOYEE ID NUMBER						DATE OF EMPLOYMENT									
PREVIOUS EMPLOYMENT DETAILS FROM DATE OF Pag-IBIG MEMBERSHIP <i>(Use another sheet if necessary)</i>															
EMPLOYER/BUSINESS NAME						EMPLOYER/BUSINESS ADDRESS						FROM (mm/yy)		TO (mm/yy)	

In the event of the approval of my application for Calamity Loan, I hereby authorize Pag-IBIG Fund to credit my loan proceeds through my Payroll Account/Disbursement Card that I have indicated on the right portion.	SIGNATURE OF APPLICANT	PAYROLL ACCOUNT/DISBURSEMENT CARD	
		NAME OF BANK/BRANCH	

APPLICATION AGREEMENT

In consideration of the loan that may be granted by virtue of this application subject to the pertinent provisions of the Implementing Rules and Regulations of Pag-IBIG Fund, I hereby waive my rights under R.A. No. 1405 (Secrecy of Bank Deposits Act) and authorize Pag-IBIG Fund to verify/validate my payroll account/disbursement card. Furthermore, I hereby authorize my present employer, or any employer with whom I may get employed in the future, to deduct the membership savings (MS) and monthly amortization due from my salary and remit the same to Pag-IBIG Fund. If the resulting monthly net take home pay after deducting the computed monthly amortization on Calamity Loan falls below the monthly net take home pay as required under the GAA/company policy, I authorize Pag-IBIG Fund to compute for a lower loanable amount.

I understand that should I fail to pay the monthly amortization due, I shall be charged with a penalty of 1/20 of 1% of any unpaid amount for every day of delay.

If for any reason excess loan proceeds are erroneously credited to my payroll account/disbursement card, I hereby authorize Pag-IBIG Fund to debit/deduct the excess amount from my account without need of further notice of demand. Should my account balance be insufficient, the Fund has the right to demand for the excess amount to be refunded.

I authorize Pag-IBIG Fund to disclose, submit, share or exchange any of my account information to legal and government regulating agencies, other banks, partner-merchants or third party in accordance with R.A. No. 9510 (Credit Information System Act), R.A. No. 10173 (Data Privacy Act of 2012), and other related or pertinent laws and regulations, as described in Pag-IBIG Fund's Freedom of Information (FOI) Manual. The credit information may also be transferred to service providers (e.g., Credit Information Corporation, Bankers Association of the Philippines - Credit Bureau), likewise in accordance with laws and regulations.

Furthermore, I have read, understood and agree to be bound by the terms and conditions governing the eDisbursement Facility/Program and Pag-IBIG Fund's partner-banks' internal guidelines.

I certify that the information given and any or all statements made herein are true and correct to the best of my knowledge and belief. I hereby certify under pain of perjury that my signature appearing herein is genuine and authentic.

This office agrees to collect the corresponding monthly amortization on this loan and the MS of herein applicant through salary deduction, together with the employer counterpart, and remit said amounts to Pag-IBIG Fund on or before the 15th day of each month, for the duration that the loan remains outstanding. However, should we deduct the monthly amortization due from the applicant's salary but failed to remit it on due date, this office agrees to pay the corresponding penalty charged to applicant equivalent to 1/20 of 1% of any unpaid amount for every day of delay and penalty for non-remittance equivalent to 1/10 of 1% per day of delay of the amount payable from the date the loan amortization or payments fall due until paid.

LORENZO L. ARCILLA JR

AUTHORIZED SIGNATORY
(Signature over Printed Name)

HR COSULTANT

DESIGNATION

Pag-IBIG EMPLOYER ID NO. AGENCY CODE BRANCH CODE

PROMISSORY NOTE

For value received, I promise to pay on due date without need of demand to the order of Pag-IBIG Fund with principal office at Petron MegaPlaza, 358, Sen. Gil Puyat Avenue., City of Makati the sum of Pesos:

(P) Philippine Currency, with an interest rate of 5.95% per annum, with interest during the grace period and shall be amortized equally over the term of the loan.

I hereby waive notice of demand for payment and agree that any legal action, which may arise in relation to this note, may be instituted in the proper court of Makati City.

Finally, this note shall likewise be subject to the following terms and conditions:

- I shall pay the amount of Pesos: (P) through salary deduction, whenever feasible, over a period of two (2) years or three (3) years, with a grace period of three (3) months. In case I am unable to pay through salary deductions for any of the following circumstances, such as but not limited to, suspension from work; leave of absence without pay; insufficiency of take home pay at any time during the term of the loan; or other circumstances analogous to the foregoing, payments should be made directly to the Pag-IBIG Fund office where the loan was released.
- Payments are due on or before the 15th day of the month starting on .
- Payments shall be applied according to the following order of priorities: Penalties, Interest and Principal.
- A penalty of 1/20 of 1% of any unpaid amount for every day of delay shall be charged to me for every day of delay.

Signed in the presence of:

Witness
(Signature over Printed Name)

Witness
(Signature over Printed Name)

Signature of Applicant over Printed Name

AUTHORITY TO DEDUCT (Optional)

In case of retirement/separation from employment, I hereby authorize my employer to deduct any outstanding Calamity Loan balance from my retirement or separation benefits to fully settle my loan obligation. In the event that my retirement/separation benefits are not sufficient to settle the outstanding balance of my Calamity Loan or my employer fails for whatever reason, to deduct the same from said retirement/separation benefits, I hereby authorize Pag-IBIG Fund to apply whatever benefits are due me from the Fund to settle the said obligation.

SIGNATURE OF APPLICANT

THIS PORTION IS FOR Pag-IBIG FUND USE ONLY

RECEIVED BY: (SIGNATURE OVER PRINTED NAME) (POSITION/DESIGNATION)	APPROVED/DISAPPROVED BY: (SIGNATURE OVER PRINTED NAME) (POSITION/DESIGNATION)
DATE	DATE

GUIDELINES AND INSTRUCTIONS

- A. Who May File**
Any Pag-IBIG Fund member who satisfies the following requirements:
- Has made at least twenty-four (24) monthly membership savings (MS);
 - A member who has withdrawn his MS due to membership maturity, or who has optionally withdrawn his MS, shall be allowed to apply for a calamity loan provided that said member has subsequently accumulated 24 MS or at least its equivalent from the cut-off date of membership maturity or optional withdrawal.
 - A member who does not meet the required 24 MS may nevertheless, be allowed to avail of a calamity loan if his total savings is at least equivalent to 24 MS, at the rate applicable to him.
 - Has made at least one (1) MS within the last six (6) months prior to the date of loan application;
 - If with existing Pag-IBIG Housing Loan, the account must not be in default as of the date of application;
 - If with existing MPL and/or Calamity Loan, the account/s must not be in default as of the date of application;
 - Is a resident of the area which is declared calamity-stricken;
 - His/her place of work is declared under state of calamity, subject to the approval of the Management; and
 - Has sufficient proof of income.
- B. How to File**
The applicant shall:
- Secure the Calamity Loan Application Form (CLAF) from any Pag-IBIG Fund Branch or download from Pag-IBIG website at www.pagibigfund.gov.ph.
 - Accomplish one (1) copy of the application form.
 - Submit the accomplished application form, together with the required documents to any Pag-IBIG Fund Branch. Processing of loans shall commence only upon submission of the complete documents.
- C. Loan Features**
- Loan Amount**
A qualified Pag-IBIG member shall be allowed to borrow an amount based on the lowest of the following:
 - Desired Loan Amount
 - Loan Entitlement
The loan entitlement shall be equivalent to eighty percent (80%) of TAV. However, if the borrower has an existing MPL, the loanable amount shall be the difference between the 80% of the borrower's TAV and the outstanding balance of his MPL.
 - Capacity to Pay
The loanable amount shall be limited to an amount which will not render the borrower's Net Take Home Pay (NTPH) to fall below the minimum requirement as prescribed by the General Appropriation Act (GAA) or company policy, whichever is applicable.
 - Interest Rate**
The loan shall be charged with an interest rate of 5.95% per annum, with interest during the grace period and shall be amortized equally over the term of the loan.
 - Loan Term**
The loan shall be repaid over a period of two (2) years or three (3) years, at the option of the member upon loan application, with grace period of three (3) months.

However, in the event that the borrower does not indicate the chosen loan term, the default term shall be three (3) years.
 - Loan Release**
The loan proceeds shall be released through any of the following modes:
 - Crediting to the borrower's disbursement card or Loyalty Card Plus;
 - Crediting to the borrower's bank account through LANDBANK's Payroll Credit Systems Validation (PACSVAL);
 - Check payable to the borrower. However, when the check remains unclaimed for a period of thirty (30) calendar days from the DV/Check date despite notice to the borrower (either by email, registered mail or personal delivery to his postal address, or Short Message Service (SMS)) informing him that the same is available for release, the check shall be cancelled and the loan will be reversed.
 - Other acceptable modes of disbursement.
 - Loan Payments**
 - The loan shall be repaid in equal monthly payments in such amounts as may fully cover the principal and interest over the loan period. Said amortization shall be made, whenever feasible, through salary deduction.
 - For self-employed individuals, Overseas Filipino Workers (OFWs) or other types of individual payors, monthly payments shall be paid over-the-counter or any other modes of payment approved by the Fund.
 - Payments shall be remitted to the Fund on or before the fifteenth (15th) day of each month starting on the fourth (4th) month following the date on the DV/check or manual disbursement voucher.
 - If the due date falls on a non-working day, the monthly amortization shall be paid on the first working day after the due date.
 - The borrower may fully pay the outstanding balance of the loan prior to loan maturity.
 - The borrower shall pay directly to the Fund in case the borrower is unable to pay through salary deduction for any of the following circumstances, such as but not limited to:
 - Suspension from work;
 - Leave of absence without pay;
 - Insufficiency of take home pay at any time during the term of the loan; or
 - Other circumstances analogous to the foregoing.
 - Payments shall be applied according to the following order of priorities:
 - Penalties; if any
 - Interest; and
 - Principal
 - Any amount in excess of the required monthly amortization shall be applied to succeeding amortizations which will be posted on the next due date.
 - Penalties**
A penalty of 1/20 of 1% of any unpaid amount shall be charged to the borrower for every day of delay. For borrowers paying through salary deduction, penalties shall only be reversed upon presentation of proof that non-payment was due to the fault of the employer. In such case, penalties due from the borrower shall be charged to the employer. Non-remittance of the total amortization shall likewise subject the employer with a penalty of 1/10 of 1% per day of delay of the amounts payable from the date the loan amortization or payments fall due until paid.
 - Default**
The borrower shall be in default in any of the following cases, without need for demand:
 - Any willful misrepresentation made by the borrower in any of the documents executed in relation hereto;
 - Failure of the borrower to pay any three (3) consecutive monthly amortizations;
 - Failure of the borrower to pay any three (3) consecutive Pag-IBIG monthly savings; or
 - Violation by the borrower of any of the membership/STL/housing loan policies, rules, regulations and guidelines of Pag-IBIG Fund.
 - Effects of Default**
In the event of default, the outstanding loan obligation shall become due and demandable. The outstanding loan obligation shall be deducted from the TAV after exerting all collection efforts.
- D. Availment Period**
The Pag-IBIG member-victim must avail himself of the Pag-IBIG Calamity Loan within a period of ninety (90) days from the declaration of calamity.
- E. Other Loan Provisions**
- The calamity loan and MPL shall be treated as separate and distinct from each other. Hence, the member shall be allowed to avail of an MPL while he still has an outstanding calamity loan and vice versa. Application for loans on these two programs shall be governed by their corresponding guidelines. The outstanding loan balance of the MPL shall not be deducted from the proceeds of the calamity loan.
 - In no case shall the aggregate STL exceeds 80% of the borrower's TAV.
 - Should another calamity occur in the same area, a borrower may renew his calamity loan anytime. The outstanding balance of his existing loan, together with any accrued interests, penalties and charges, if any, shall be deducted from the proceeds of the new calamity loan.
 - In the event of membership termination prior to loan maturity, the outstanding balance shall be deducted from the borrower's TAV, and/or any amount due him or his beneficiaries in the possession of the Fund. In case of borrower's death, the outstanding balance shall be computed up to the date of death. Any payments received after date of death shall be refunded to the borrower's beneficiaries.
 - Borrower may request for the immediate offsetting of his/her outstanding calamity loan balance against TAV. It shall be effected upon approval of the borrower's request; provided, such request is based on any of the following justifiable reasons: Total disability or insanity; Separation from service by reason of health; Death of member's immediate family member; Distressed member due to unemployment limited to layoff and/or closure of company; Critical illness of the member or any of his/her immediate family member, as certified by a licensed physician under one of the following categories, subject to the approval of the DCEO-Member Services Cluster: cancer, organ failure, heart-related illness, stroke, neuromuscular-related illness; Repatriation of OFW member from host country and other meritorious grounds as may be approved for by the Board.
 - If TAV offsetting has been effected on the borrower's defaulting calamity loan, he may apply for a new calamity loan provided he has paid at least six (6) monthly amortizations prior to default and its consequent offsetting against the borrower's TAV. However, if he has paid less than six (6) monthly amortizations prior to default, he may apply for a new loan only after two (2) years from the date of TAV offsetting.
 - In case there is a need to update the borrower's information at point of loan application, the borrower shall not be required to submit Member's Change of Information Form (MCIF, HQP-PFF-049). The updating of information shall be based on the submitted CLAF. The borrower shall be required to submit supporting documents, if necessary. Please refer to the Checklist of Requirements specified at the back portion of the MCIF.

CERTIFICATE OF NET PAY

NAME OF BORROWER

For the month of: _____

Basic Salary _____

Add: Allowances

Gross Monthly Income _____

Less: Deductions

Total Deductions _____

Net Monthly Income _____

Issued this _____ day of _____, 20____.

I certify under pain of perjury that the above-mentioned information is true and correct.

LORENZO L. ARCILLA JR

AUTHORIZED SIGNATORY
(Signature Over Printed Name)