

APPLICATION FOR PARTICIPANT LOAN

Employer: \_\_\_\_\_

Participant: \_\_\_\_\_

I hereby apply for a loan from the Plan. In support of this loan application, I attach such information which the Plan Administrator may require to determine whether I qualify for the loan. I also authorize the Plan Administrator to secure any credit reports to determine my creditworthiness and ability to repay the loan.

In applying for this loan, I acknowledge that I have read the section of the Summary Plan Description governing Plan loans and have been furnished with a copy of the Participant Loan Program established by the Plan.

The amount of the loan is \$\_\_\_\_\_ for a period of \_\_\_\_\_ months (if longer than 60 months, the purpose of the loan must be to acquire your principal residence).

Name: \_\_\_\_\_ Age: \_\_\_\_\_

( ) Married ( ) Unmarried ( ) Separated

I understand the Administrator will make any loan in reliance on the statements on this APPLICATION FOR PARTICIPANT LOAN which I certify are correct and complete. If any statement proves false, then the Plan may declare my indebtedness immediately due.

I hereby authorize the Administrator to verify the statements in this application and to obtain any information the Plan or its authorized representative may require in connection with this application.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_ .

\_\_\_\_\_  
Print Name of Participant

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Street Address (include apartment no.)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
City State Zip Code