

PENSION LOAN QUESTIONNAIRE**PLAN INFORMATION**

Trustee's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____

Name of Sponsoring Business: _____

Business Address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____

Type Business:

- () Sole Proprietorship () Limited Partnership () LLC/PLLC () Professional S-Corp
 () C-Corporation () S-Corporation () Professional C-Corp

EIN of Business _____ - EIN of Pension _____ -

Pension Type:

- () Profit Sharing () Money Purchase

PLAN PARTICIPANT INFORMATION TO DATE

Participant's Name

Participant's Portion
of Total Plan AssetsParticipant's Total
Vested Amount

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

BORROWING PARTICIPANT INFORMATION

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____

Social Security Number: _____ Date of Birth: _____

Is the Participant Married?

- () Yes () No

PENSION LOAN QUESTIONNAIRE

SPOUSE INFORMATION (IF APPLICABLE)

Name: _____

Social Security Number: _____ Date of Birth: _____

LOAN HISTORY

Has the Participant Ever Taken a Loan from the Plan?

() Yes () No

If Yes, please provide the dates, loan amounts, and loan terms for each loan received from this Plan.

Date Loan Taken	Amount of Loan	Term of Loan	Outstanding Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Please attach an amortization schedule for each prior loan taken from this Plan. Please provide documentation for all deviations from this schedule, including both early and late payments.)

LOAN INFORMATION

Requested Loan Amount: _____

Requested Loan Term: _____ (Not to exceed five (5) years)

Date Loan to be Taken: _____ (Must occur on the 1st or 15th of the month)

Brokerage Firm where the account is held: _____

Name on the Account(s) from which loan funds are to be drawn: _____

Account Number(s) from which loan funds are to be drawn: _____

TRUSTEE SIGNATURE

The Plan Trustee has reviewed the loan information. Date: _____

Trustee(s) Signature: _____

PENSION LOAN QUESTIONNAIRE

Other Applicable Rules:

- A. The Plan Trustee, in cooperation with the Administrative Committee, will review all loan applications, using essentially the same criteria in evaluating a Participant's loan application as would be considered by a bank. The criteria are: purpose of loan, amount of loan, security offered, and credit risk of the applicant.
- B. Collateral for the Participant's loan will be the entire vested account balance within the Plan.
- C. Loans from this Plan are restricted to parties in interest (i.e. active employee Participants). Only two loans may be taken per 12 calendar months.
- D. The interest rate for all Plan loans will be comparable to the current rates charged by banking institutions for loans of a similar nature.
- E. Payments must be made in accordance with the amortization schedule provided upon approval of the loan. A grace period of one quarter (90 days) will apply to all late payments. Payments made beyond 90 days of the payment due date will place the loan in default status and the remaining balance of the loan will be deemed a distribution to the Participant. Should this occur at the time the Participant is under 59½, a 10% early withdrawal penalty will apply in addition to income taxes.
- F. If the Participant requesting a loan is married, his/her spouse must provide written consent for all loans in excess of \$3,500.