401(k) Employee Loan Application

Use this form to request a loan from your Retirement Plan. Please note, your Plan must allow loans for you to request a loan. Please complete the following paper work to obtain a loan. 1.) Complete a Loan Application, Spousal Consent, Promissory Note, and Irrevocable Pledge & Assignment, and submit to your employer (Plan Administrator); 2.) If your account balance is greater than \$5,000.00 the spousal consent form will need to be signed by your spouse; 3.) Your employer (Plan Administrator) approves loan applications; 4.) Check is prepared and mailed to Employee; 5.) Loan payments are made by the employer deducting the payment amount from your pay as an additional salary reduction 6.) Loan application usually takes 10 to 15 business days to process once approved.

Employee Information:		Employer Information:
First Name/MI/Last Name		Company Name
Street Address:		Contact Person
City	State Zip	
Social Security Number	Daytime Phone	Date of Birth
E-mail	Marital Status □ Single □ Married	
Minimum Loan: \$1,000 Maxin	mum Loan: Generally the	e lesser of 50% of your vested account balance or \$50,000
☐General Purpose Loan Choose rep	payment term:	'ear □ 2 Years □ 3 Years □ 4 Years □ 5 Years
Purpose of this loan is:		
Turpose of this foat is.		Amount of Loan:
		s
form. I affirm that all information that	I have provided is true and cribed. I understand that pa	gree to all pages of this 401(k) Employee Loan Application d correct. I certify that the amount requested does not ayments are to be made by payroll deduction and are due eceive.
Employee Signature:		Date:
Plan Admin/Trustee Signat	ture:	Date:

Personalized Pensions, Inc 10197 N 92nd Street, Suite 102 Scottsdale AZ, 85258

Spousal Consent

I	_ the spouse of, Employee's Name
do consent to the attached application	Employee's Name on for a participant loan requested by my spouse from 401(k) Plan and Trust in the sum of \$
I understand that this loan cannot understand that my consent is irrevo	ot be established unless I give my consent and I ocable.
	his loan I may be giving up certain retirement benefits spouse's death, disability or separation from service
Spouse's Signature	Date
Witnessed By:	
Plan Representative Notary Public	Date
Or:	
consenting to this loan I may be give	_ am currently unmarried and I understand that by ing up certain retirement benefits that otherwise I ity or separation from service with the company.
Signature	Date

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Promissory Note

Employee Name	Amount of Note	
		\$
FOR VALUE RECEIVED, on or before the assig to pay to the order of the Plan as listed below for this date the loan was approved at the rate of (probalance from time to time unpaid.	he amount requ	est plus interest commencing on
		%
Employer (Plan)		Rate (prime plus one)
FORM OF PAYMENT		
Loan repayments of principal and interest n Indicate your payrol		~ · ·
□Weekly □Bi-Weekly	□Semi-Monthly	☐ Monthly
Payments shall commence 30 days after the appreach pay period thereafter until the loan has been any time or times all or any portion of the unpaid may be prepaid without premium or penalty, the accrued interest and remainder to unpaid principal. The payment of this Note is secured by the vested	paid in full. A principal sum a amount of the p	t the option of the Participant, at and accrued interest on this Note prepayment to be applied first to
the Employee's 401(k) Plan and Trust as listed in		_
At the election of the holder or holders hereof, uposum, together with accrued and unpaid interest event of a default in the payment of any princip terms hereof. Further, this Note shall be due a Participant, subject to section 414(u) of the Code termination of employment.	thereon, shall all or interest with the months of the contract	become due and payable in the then due in accordance with the on termination of service of the
The above paragraph shall not apply in the event to a direct transfer of this Note to a qualified plan be null and void if transfer is not completed prior 90th date after the participant terminates service w	of his/her new to the due date	employer. This provision shall of the note or if earlier, than the
Participant's Signature		Social Security Number

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Irrevocable Pledge and Assignment

In consideration of a loan to me in the am	nount of \$ by the				
trustee(s) of the	(Employer) 401(k) Plan and Trust I,				
	beby irrevocably pledge and assign as collateral				
	nce necessary to satisfy the outstanding balance				
of said loan, with accrued interest, plus	s the costs, if any, incurred by the trustee(s) in				
	e attorney's fees. I understand and acknowledge				
that if I fail to repay this loan when due and payable or fail to pay any installment or					
interest payment may result in the trustee(s) foreclosing on any property pledged as					
security for this loan.					
TC 1					
If my employment terminates before my obligation under this pledge and assignment has					
been fully discharged and under circumstances in which the trustee(s) would usually make a distribution from the plan to me or my designated beneficiary, I hereby empower					
	distribution to me or my designated beneficiary				
· · · · · · · · · · · · · · · · · · ·	edness at the time of my termination, along with				
any accrued interest on the indebtedness.					
·					
5	This Irrevocable Pledge and Assignment shall bind my heirs, personal representatives or				
other legal representatives.					
EXECUTED this day of	,				
Participant's Signature	Social Security Number				
	200.00 2000.00 1.00.000				
Date	Witness				

Payment Options

	Please mail my check to the address listed below.	
Address:		
City:		
State:	Zip:	
	Please wire my funds to the following below (specific wiring instructions will	be needed)
Bank:		
Bank Rou	iting No.	
Name on	Account:	_
Account	No	_
Further C	Credit to:	_
Type of a	ccount:	

There will be a \$15.00 fee for all wired transitions