Government Employees' Retirement System 3438 Kronprindsens Gade, GERS Complex - STE 1 St. Thomas, V.I. 00802-5750 (340) 776-7703

Fax: (340) 693-3926



Government Employees' Retirement System #3005 Orange Grove - Lot 5 Christiansted, St. Croix, V.I. 00820-4313 (340) 773-5480

Fax: (340) 773-5497

APPLICATION FOR PERSONAL LOAN TO ACTIVE MEMBERS

www.usvigers.com

Amount Requested \$	se			
NAME OF APPLICANT (F	Please print)			
First	M.I.	Last		
Soc. Sec. No.	Tel. Nos (W)		_ Ext(H)	
Mailing Address:		Physical Addr	ress:	
	Zip		Zip	
Employee Payroll No	Department		Island	
Date of Birth	Gross Biweekly Salary \$		Estimated Date of Retireme	nt
	d, will bear interest computed on the unp			
	of \$per pay period		=	
	Biweekly deductions must be at least 59			
	OR AM I CONTEMPLATING FILIN			
Witness to Signature	Signature of Me	mber		Date
Refinanced Loan No.	DETAILS	OF LOAN		
			Loan Amount \$	
	Loan Payoff \$			
	a.) Sub Total \$ ———			
	b.) Application Fee \$			
	, 		Less Total (a+b) (\$)
			Check Amount \$	
(A) Contribution Credits as of			\$	
	s (Maximum amount of Loan)			
(C) Amount of Loan Granted				
(D) \$ Minin	mum Biweekly Deduction 5% of gross	s salary		
(E) Biweekly Deduction required to repay P&I within the designated term				
(F) Biweekly Deduction for Credit Life/A&H Insurance Premium				
•	Deduction required to repay Loan &			
			N NO	
LOAN APPROVED FOR \$ _		DATE		
		Appro	oving Officer	