

PARTICIPANT LOAN APPLICATION

TO BE COMPLETED BY APPLICANT

NAME OF EMPLOYER: _____

AMOUNT OF LOAN: I hereby apply for a loan in the amount of \$_____ from my employer's qualified retirement plan.
- If the amount of loan requested is greater than the maximum permitted loan amount, the amount of the loan will be adjusted downward to the maximum amount unless instructed otherwise.
- The minimum loan amount is \$1,000.00.

LENGTH OF LOAN: This loan shall be for a period of: _____ (years or months)
- Term is not to exceed five years (unless for the purchase of a residence.)

REPAYMENT SCHEDULE: Payments shall be due each payroll period.
- Payment may not be less frequent than quarterly.

SECURITY: Unless specified otherwise, the security for this loan shall be the non-forfeitable balance of my retirement account.

MARRIAGE STATUS: I am currently: Married Single

INTEREST RATE: The interest rate will be the Prime Rate as reported in the Wall Street Journal for the date on which this application is received by the Plan Administrator.

Name (Please Print) Social Security Number Date of Birth

Address City, State Zip Code

To have your loan documents delivered electronically, please provide your e-mail address:

Return this form to:
Advantage Administrators or fax to: 319-352-4018 or e-mail to: penadmin@advantageadmin.com
P.O. Box 118 or 319-352-2610
Waverly, IA 50677-0118