

The following information is needed to process your request for a loan. Please **fully complete** and return the documents that pertain to your loan request. Remember that it is your responsibility to supply us with the proper information. If you are married, your spouse must sign the **Spousal Consent Section** of the application. Their signature **must be notarized** with a notary seal or stamp placed on the application and a copy of your spouse's signed Social Security card must be submitted unless already on file at the Trust Fund Office.

The minimum loan amount is \$250. The maximum automobile loan amount is \$30,000. The loan amount that you are requesting cannot be for more than the purchase agreement of the item(s) you are requesting a loan for; and cannot be more than the Kelley Blue Book value on a vehicle if you are requesting an automobile loan.

You may not have more than 3 loans (Home, Auto, Tuition, Disability, Funeral) open at any time. Please remember that your total loan balance (combined with any existing loans) cannot exceed 50% of your Individual Account balance up to a maximum loan balance of \$50,000. Submission of the loan application does not guarantee your eligibility for a loan.

Documents required to process loan requests by loan type:

LOAN TYPE	DOCUMENTS NEEDED
HOME LOANS: YOU CANNOT HAVE MORE THAN 1 HOME LOAN OPEN AT ANY TIME, LAND CONTRACTS ARE NOT PERMITTED.	
Home or Land Purchase	<ul style="list-style-type: none"> • Fully Completed Home Purchase Agreement (Page 5 in this packet) • Purchase Agreement or Property Deed from the Realtor or Seller
New Home Construction	<ul style="list-style-type: none"> • Fully Completed Home Purchase Agreement (Page 5 in this packet) • Property Deed, Purchase price for land and estimates from store or Contractor • Estimates must be in the Iron Worker's name
Home Improvement	<ul style="list-style-type: none"> • Estimates for supplies from store if you are completing the home improvement project yourself • Estimates must be in the Iron Worker's name. If you hired a contractor, provide the estimate for supplies and labor from the contractor on his letterhead and include the contractor's Tax ID (required).
Home Retention	<ul style="list-style-type: none"> • Letter of foreclosure from the Mortgage Company on their letterhead
Automobile Purchase	<ul style="list-style-type: none"> • Purchase Order if vehicle purchased from a dealership • Fully Completed Automobile Purchase Agreement (Page 4 of this packet) • Copy of Title • Loan request cannot exceed Kelley Blue Book Value
Tuition	<ul style="list-style-type: none"> • Please include the name of student(s) and dates • You may apply for 1 full year or by semester(s) • You may have up to 3 tuition loans open (on the same student or more than one student) if no other loans are active • Official statement or document from the college or private school listing: <ul style="list-style-type: none"> ▪ Tuition Amount ▪ Cost of Books ▪ Living Quarter Expenses (on campus housing only)
Disability	<ul style="list-style-type: none"> • Disability Examination Report signed by a D.O. or M.D. Must be Board approved
Funeral Expenses	<ul style="list-style-type: none"> • Statement from the funeral home indicating that you or your spouse is liable for the expense and the portion that you are liable for

Please return the completed form to:
 (Original forms only, faxes not accepted)

Iron Workers District Council of Southern Ohio & Vicinity Annuity Trust
1470 Worldwide Place
Vandalia, OH 45377-1156



DEFAULTED LOANS

If you default on a loan that you obtained on or after January 1, 2002, the following plan guideline applies:

Once a loan is in default, the only way to repay the defaulted loan is to pay the entire unpaid loan balance, plus accrued interest to date, in one lump sum payment. If you default on a loan, and do not repay it in one lump sum, the defaulted loan is considered to be distributed, and you are not eligible to apply for another loan from the Plan until the loan is paid in full.

ANNUITY LOAN PLAN GUIDELINES

Please read these guidelines before completing a loan application

You cannot take a loan from your Annuity Plan:

- 1) To pay off another loan
- 2) To repay a loan owed to any financial institution
- 3) To repay a loan taken from this Annuity Plan
- 4) To pay for Closing costs for home/land purchases

If you are applying for any of the following loans from your Annuity Plan:

- 1) Home Purchase
- 2) Land Purchase
- 3) Automobile
- 4) Funeral
- 5) Tuition

You are unable to take an Annuity Plan loan for any amount that is financed through any other loan or financing arrangement. You must submit proof by providing the first page and the signature page of the loan paperwork, or a statement from your loan officer. This documentation must be on the lender's letterhead and be signed and dated by the loan officer.

For example, if you are purchasing a home for \$100,000, and the amount you finance through a bank or other financial institution is \$80,000, then the amount that is eligible for an annuity plan loan is \$20,000.

LOAN APPLICATION

Part 1: Participant Information – Please print

Last Name: _____ First Name: _____ Middle Initial: _____
 Local Number: _____ SSN: _____ - _____ - _____ DOB: ____ / ____ / ____ Phone: (____) _____
 Street Address/P.O. Box: _____ City: _____
 State: _____ Zip Code: _____ Email Address: _____

Part 2: Loan Amount/Repayment Terms

I hereby request a loan from the Plan in the amount of \$_____ to be paid back over _____ months. If the loan is \$1,000 or less, its term cannot exceed 36 months. Any loan over \$1,000 cannot exceed a term of 60 months. If the loan is for the purchase of a primary residence, the loan term cannot exceed 120 months. I understand that my loan application must be at least \$250.00 and cannot exceed the allowable limit under the Plan.

Part 3: Loan Eligibility- Your request will not be submitted for consideration until all documentation is received

Please indicate below which type of loan you are applying for.

Funds in connection with the purchase, retention, or permanent improvement of:

House Cooperative Condominium Other Real Property

Provide below the location of house, cooperative, condominium or other real property in which you will reside (*note if the address listed here is different than the mailing address listed above, please complete the Home Improvement agreement*):

Street Address: _____

City: _____ State: _____ Zip: _____

Is the loan to be applied against a down payment? Yes No Permanent Improvement? Yes No

Payment for funeral expenses incurred due to the death of: _____

Applicant's Liability \$ _____ Full Name of Deceased _____ Relationship _____

Expenses incurred for tuition at an accredited educational institution for you, your spouse, or your dependent child.

Name of Student: _____ Relationship: _____

Name of School: _____ Full Time Student? Yes No

Total amount of tuition and/or room and board against which the loan is to be applied: \$ _____

Support while under disability and resulting temporary employment: (Must be approved by Board of Trustees)

Date of Disability ____ - ____ - ____ Nature of disability: _____

Did you apply for, or are you receiving Workers' Compensation for this disability? Yes No

To provide for the purchase of a motor vehicle which shall be used by the participant to travel to and from his/her employment, and the title to which shall be held in the same name of the participant. Please note that the maximum available loan amount for this loan type is \$30,000.

Make, Model and Year of Vehicle: _____

Name and Address of Seller: _____

Vehicle's Purchase Price or Kelley Blue Book Value: \$ _____

Part 4: Method of Payment

Mail a check to the address provided in Part 1. Note: If you choose to have your check overnighted, the overnight service is FedEx. You must provide your own FedEx account information as you will be charged for the overnight delivery.

via regular USPS mail

overnight via FedEx account # _____ Account zip code _____ Account phone number _____

Direct Deposit If you choose this option you must also complete ACH Loan Repayments on Page 8

Note: If you provide incorrect or incomplete information and the transfer cannot be completed, the plan will distribute your proceeds in the form of a check mailed to your home address. Please allow an additional 4-6 days for mail delivery.

Checking Savings 9 Digit Routing Number: _____ Account Number: _____



Your 9 digit routing number can be found on the bottom of your personal checks. Routing number for savings accounts may be different, please consult with your personal bank.

Part 5: Loan Terms and Conditions – (also see the Plan Loan Provisions included in the SPD and Plan Document)

1. The amount you may borrow cannot exceed the lesser of \$50,000 or 50% of your Individual Account balance.
2. A \$75 loan processing fee will be deducted from the proceeds of your loan.
3. You must agree to monthly automatic payments, withdrawn from an account you have designated OR repayment via check, sufficient to pay loan principle and interest in the designated timeframe.
4. Repayments of loan principal and interest will be allocated to the various investment options according to your most current allocation instructions.
5. You must pledge your vested account balance as security for repayment.
6. You may have up to three separate loans outstanding at one time, however, they must be loans for separate categories. Multiple tuition loans for educational expenses are the only exception to the rule.
7. Your loan will be considered in DEFAULT after you miss three (3) payments, regardless whether the missed payments occur in consecutive months.
8. If you default on your loan, this will impact your eligibility for future loans.
9. The Trustees are sole judges for loan approvals. Their judgement is final and binding on all parties.
10. Loans are subject to other rules that the Board of Trustees and the Plan Administrator may establish from time to time which are explained the Summary Plan Description or Plan Document.
11. A loan will not be made if it would be inconsistent with the terms of a Qualified Domestic Relations Order delivered to the Trustees before approval of the loan.
12. If you selected *Direct Deposit* under Part 4: Method of Payment, you authorize Matrix Trust to deposit the loan proceeds to the above numbered account by Direct Deposit. You also authorize Matrix Trust to initiate debits to that bank account for any overpayment made and the bank named above to debit your account and refund any such overpayment to them. Payments made under this agreement fully satisfy any obligation to make payments to you.

Part 6: Participant Acknowledgement and Signature

I hereby acknowledge that I have read the Loan Provisions in the Summary Plan Description and understand the Plan provisions and rules applicable to this loan.

I also certify that I am: Single Married Divorced Widowed

X _____
Participant's Signature Print Name Date

For Office Use Only:

X _____
Fund Administrator's Signature Date

SPOUSAL CONSENT FORM

IF YOU ARE MARRIED, your **SPOUSE** must complete and sign this page in front of a notary.

IF YOU ARE NOT MARRIED, SKIP THIS PAGE

Spousal Consent of Loan

I, _____, hereby irrevocably consent to my spouse _____
(PRINT SPOUSE'S NAME) (PRINT IRONWORKER'S NAME)

to take a loan from his/her Annuity Fund. I grant this consent with complete understanding of the following:

- I understand that by giving this consent, I am allowing my spouse to pledge as collateral for a loan from the Plan up to fifty percent (50) of the vested account balance in the Plan that otherwise would be payable for my benefit in the event of the death of my spouse.
- I understand that to the extent that my spouse fails to repay any part of a loan from the Plan, the unpaid balance will be collected by reducing my spouse's account in the Plan.
- I understand that once I have given this consent, I cannot withdraw it as to any loan made to my spouse within ninety (90) days of the date below.

X _____
Spouse's Signature **Date**

You must include a photocopy of your spouse's signed Social Security card with this application
(Disregard if spouse's signed Social Security card has previously been submitted to Fund Office)

Notary Section

State of _____

County of _____

On this _____ day of _____, 20____, before me came _____ known to me to be the person who executed the foregoing statement and who acknowledged to me that he/she executed the same.

Notary Public

(Seal)

For Office Use Only:

X _____
Fund Administrator's Signature **Date**

VEHICLE PURCHASE AGREEMENT

You MUST include a copy of the vehicle title with this form

VEHICLE DESCRIPTION: Complete this section if purchasing a vehicle

Year: _____ Make: _____ Model: _____ Trim: _____ VIN#: _____

Current Odometer: _____ Number of Doors: _____ Type of Transmission: _____ Drive Type: _____
(ex. 2WD/4WD)

Engine Type: _____ Please check all equipment below that applies to vehicle:
(ex. 4/6/8 cyl)

<input type="checkbox"/> ABS (4-Wheel) <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Sliding Rear Window <input type="checkbox"/> Power Sliding Rear Window <input type="checkbox"/> Power Windows <input type="checkbox"/> Power Door Locks <input type="checkbox"/> Cruise Control <input type="checkbox"/> Power Steering <input type="checkbox"/> Tilt Wheel <input type="checkbox"/> AM/FM Stereo <input type="checkbox"/> Cassette <input type="checkbox"/> CD (Single Disc) <input type="checkbox"/> CD (Multi Disc) <input type="checkbox"/> MP3 (Single Disc) <input type="checkbox"/> MP3 (Multi Disc) <input type="checkbox"/> Premium Sound <input type="checkbox"/> Navigation System	<input type="checkbox"/> DVD System <input type="checkbox"/> Video System <input type="checkbox"/> Parking Sensors <input type="checkbox"/> Backup Camera <input type="checkbox"/> Power Seat <input type="checkbox"/> Dual Power Seats <input type="checkbox"/> Leather <input type="checkbox"/> Sun Roof <input type="checkbox"/> Moon Roof <input type="checkbox"/> Stepside Bed <input type="checkbox"/> Running Boards <input type="checkbox"/> Pickup Shell <input type="checkbox"/> Custom Bumper <input type="checkbox"/> Grille Guard <input type="checkbox"/> Winch <input type="checkbox"/> Snow Plow	<input type="checkbox"/> Custom Paint <input type="checkbox"/> Two-Tone Paint <input type="checkbox"/> Utility <input type="checkbox"/> Underbody Hoist <input type="checkbox"/> Dump Bed <input type="checkbox"/> Hydraulic Liftgate <input type="checkbox"/> Roof Rack <input type="checkbox"/> Hard Tonneau Cover <input type="checkbox"/> Bed Liner <input type="checkbox"/> Towing Package <input type="checkbox"/> Allow Wheels <input type="checkbox"/> Premium Wheels <input type="checkbox"/> Wide Tires <input type="checkbox"/> Oversize Off-Road Tires <input type="checkbox"/> Oversized Premium Wheels 20"+ <input type="checkbox"/> Dual Rear Wheels	Truck Cab Style: _____ (ex. Regular, Double, Crew, SuperCab) Additional options not listed here: _____ _____ _____ _____ _____ _____ _____ _____ _____
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PURCHASE INFORMATION: Complete this section only if purchasing from an individual. If purchasing from a dealership, you may provide the purchase agreement

I, (Print Iron Worker's Name) _____, am

purchasing a vehicle from (Print Seller's Name): _____.

The agreed upon purchase price is \$ _____.

Buyer's Signature: _____ Date: _____

Seller's Signature: _____ Date: _____

NOTARY SECTION

State of _____

County of _____

On this _____ day of _____, 20____, before me came the individuals listed above, known to me to be the persons who executed the foregoing statement and who acknowledged to me that they executed the same.

Notary Public

(Seal)

LAND OR HOME PURCHASE AGREEMENT

You MUST include a copy of the Deed or Contract with this form

PURCHASE INFORMATION: Complete if purchasing land or home

I, _____, am purchasing:
(Print Iron Worker's Name)

Land

Home

Located at:

(Street Address)

(City)

(State)

(Zip Code)

From: _____
(Print Seller's Name)

The agreed upon purchase price is \$_____.

NOTARY SECTION: Complete if purchasing from an individual

Buyer's Signature: _____

Date: _____

Notary Signature: _____

Date: _____

Notary Expiration Date: _____

(Seal)

Seller's Signature: _____

Date: _____

Notary Signature: _____

Date: _____

Notary Expiration Date: _____

(Seal)

HOME IMPROVEMENT AGREEMENT

This form is not needed if you are already living in the home that will be remodeled

INFORMATION

I, _____, am remodeling a home that I am
(Print Iron Worker's Name)

not currently living in Located at:

(Street Address)

(City)

(State)

(Zip Code)

When the home improvement is complete, this home will become my primary residence, and I will change my address with the Fund Office and Local Union.

NOTARY SECTION

Iron Worker's Signature: _____

Date: _____

Notary Signature: _____

Date: _____

Notary Expiration Date: _____

(Seal)



LOAN REPAYMENT METHODS

Pay Electronically

Milliman allows you to make your monthly loan payments electronically. All you need to do is complete the enclosed Participant ACH Agreement and the debit will occur on the 20th day of each month or first business day thereafter.

REMINDER: If you chose to have your loan proceeds direct deposited to your bank account, you must also agree to make your repayments via ACH.

Return the completed ACH Agreement and attach your voided check and include it with the loan application.

Pay via Check

If you choose to mail checks to repay your loan, Milliman will mail you a payment coupon with instructions for repayments.

If you decide to switch to ACH repayment at any time over the life of your loan, the ACH Repayment form can be found online at MillimanBenefits.com or you may request a copy be mailed to you by calling the Benefit Service Center at 866.767.1212.

If you have any questions regarding your loan repayment, please contact Milliman at 866.767.1212.



PARTICIPANT AGREEMENT FOR ACH LOAN REPAYMENTS

The Participant hereby authorizes Matrix Trust (Custodian of the Plan), to initiate debit entries (or corrective credit or debit entries in the event of an error) to his/her account at the depository financial institution named below and to debit the same to such account. These debits correspond to periodic loan payments to the Plan. Account Owner acknowledges that the origination of ACH transactions to its account must comply with the provisions of U.S. law and that he/she agrees to comply with National Automated Clearing House Rules and Regulations about electronic transfers as they exist on the date of his/her signature on this form or as subsequently adopted or amended.

NOTE: The Account Owner MUST be the Participant in this Plan. PLEASE PRINT CLEARLY.

Participant: _____ Social Security Number: XXX-XX-_____

Phone: (____) _____ - _____ Email: _____

Select One: Checking Account

Savings Account

Name of Financial Institution: _____

Routing Number: _____ (Must be nine (9) digits)

Account Number: _____

PLEASE ATTACH VOIDED CHECK HERE (REQUIRED IF CHECKING ACCOUNT SELECTED)

This authorization will remain in effect until Milliman has received signed, written notification from the Participant of its termination, at least ten (10) business days prior to its effectiveness.

- Funds will be withdrawn from your account on the **20th day of each month** or first business day thereafter
- First payments for new loans processed will be the 20th of the following calendar month
- Any **CHANGES** in the account number must be **RECEIVED** by Milliman **by the 15th of the month** to be effective that same month
- Milliman and Matrix Trust are not responsible for bank account charges, NSF or other bank fees or overdrafts caused by automatic transactions

I certify by signing below that the information I have provided above is correct to the best of my knowledge.

Participant Signature: _____ Date: _____