

LETTER OF AUTHORITY

Date

The Branch Head
Social Security System

Dear _____,

I am an SSS member with past due salary loans and I intend to apply for Loan Restructuring Program. However, I cannot personally apply due to _____.

_____ I therefore assign
Mr./Ms./Mrs. _____ with the following duties and performance.

1. To apply for Loan Restructuring of my past due short term loan/s from Social Security System in accordance to its terms and conditions;
2. To request, make, sign, execute and deliver all the necessary documents in relation to my application for Loan Restructuring including, but not limited to Statement of Loan Balances, Loan Restructuring Application, Affidavit of Residency, and Promissory Note;
3. To duly receive in my behalf the legal notices and documents regarding my SSS Loan Restructuring;
4. To make payments for the said Loan Restructuring; and
5. To do and perform any and all acts necessary for the faithful execution of the foregoing acts and deeds.

HEREBY GIVING AND GRANTING unto my said authorized representative full authority to do and perform any and every act and thing whatsoever requisite or necessary or proper to be done in and about the premises as fully to all intents and purposes as I might or could lawfully do if personally present.

Very truly yours,

Signature Over Printed Name
Member-Borrower

SS No. _____

Signature Over Printed Name
Authorized Representative