REPUBLIC OF THE PHI	LIPPINES)
PROVINCE OF	) S.S

## **AFFIDAVIT OF RESIDENCY**

I,	, Filipino, of legal age, single/married, with
residence	address at
after havir	ng been duly sworn to in accordance with law, do hereby depose and state, that:
1.	I am a bonafide member of the Social Security System with SS No;
2.	My address (work/home) was at
	with postal code when (name of calamity/disaster) happened;
3.	My capacity to pay my loan/s with SSS has been impaired by the calamity/disaster that occurred in the aforesaid address which resulted to incurrence of interests and penalties of the said loan/s;
4.	I understand that in case it is proven that I have given false information or misrepresentation in this document or in any other documents submitted in connection with my Loan Restructuring Application, I undertake to pay the outstanding balance of the loan including the condoned penalty;
5.	I am executing this Affidavit to attest to the truthfullness of the foregoing statements.
WITNESS	my hand this at
	Affiant/Attorney-In-Fact
S	UBSCRIBED AND SWORN to before me this, at
00 10	No, affiant exhibiting his/her issued on
SS ID	at
	at
	NOTARY PUBLIC
Doc. No.	
Page No.	
Book No.	
Series of	