



Mail To: AMI Benefit Plan Administrators, Inc. 100 Terra Bella Drive Youngstown, OH 44505	Email To: PMT@amibenefit.com Fax To: 1-866-436-6703
Questions: 1-800-451-2865	

REQUEST FOR LOAN PAPERWORK

Use this form to request AMI to determine loan availability and if possible, send you formal loan paperwork to sign and return.

Participant Information:

Company Name		
Your Name		
Address		
City	State	Zip
Social Security Number (Last Four)	Date of Birth	Marital Status (Single/Married)
Date of Hire	Email Address	Phone Number

Reason for Loan Request (Check One)	How would you like the paperwork delivered?
<input type="checkbox"/> Other <input type="checkbox"/> Purchase of a Primary Residence <small>(AMI will need a copy of a mortgage estimate. Review your plan's loan policy to determine the permitted length of a loan for the purchase if a primary residence.)</small>	<input type="checkbox"/> Mail to the address above <input type="checkbox"/> Email to the address on file with AMI <small>Log into your account at www.amibenefit.com to verify or change your email with AMI.</small>

Loan Details: *The minimum loan amount is \$1,000.00.*

AMOUNT OF LOAN REQUESTED: (Choose One) <input type="checkbox"/> Maximum Amount Available <input type="checkbox"/> Dollar Amount \$ _____ <input type="checkbox"/> Dollar Amount \$ _____ OR Maximum Amount Available, if LESS.	
Length of Loan In Years _____ (1-5) OR Length of Loan in Months _____ (1-60)	
How often are you paid?	

Notes _____

Signature _____ Date _____