

NATIONAL PROVIDENT FUND ASSIGNMENT FORM

Solomon Islands National Provident Fund
P.O Box 619
Honiara, Solomon Islands.

I (.....) hereby authorize the National Provident Fund (NPF) to advise Development Bank of Solomon Islands (DBSI) the following details of my Provident Fund Balance/Contribution for the purpose of my loan application.

Name:

Signature:

To: Development Bank of Solomon Islands (DBSI)
P O Box 911,
Honiara,
Solomon Islands.

Full Name of Member:	
Membership Number:	
Provident Fund Balance as at/...../.....	SBD.....
Two thirds of current balance	SBD.....
Current Pledge amount to other banks <i>(please specify the name of the bank)</i>	SBD.....
Amount available to pledge to DBSI	SBD.....
Number of Claims paid to DBSI or Other Banks

As instructed by the above NPF member

We irrevocably undertake to pledge 2/3 NPF balance of the above named member on submission of

- a) **Cancellation letter from the other Bank.**
- b) **Letter of request to arrange a fresh pledge in favor of DBSI.** c) **Duly complete Pledge document.**

*Delete what is not applicable

Authorized Officer
– National
Provident Fund
Name: Staff ID: