## **HOME OWNER MOVING LOAN AFFIDAVIT**



**HUCTW** Authorization







Your Name	Harvard University I.D. #
Department Name	Mobile/Home Phone (must be effective after transition)
New Address	
Agreement:	
is paid in full I hereby commit to making pays employee of the University in the amount of repayment of my home owner moving exper	, 20, and continuing for one year going forward, until said loan ments via direct deposits each pay period from my earnings as an \$ to the Harvard University Employees Credit Union in se loan of \$ I agree that I will arrange for direct the loan within 7 days of the loan being approved.
deduct the remainder of the money owed or deduction does not reduce my paychecks be federal law, and to remit the same to the Ha	ay this loan in full on time, I hereby authorize Harvard University to a the transition loan from my Harvard University pay, provided that such low the minimum hourly wage as determined by Massachusetts and/or rvard University Credit Union in full repayment of the outstanding loan. I efault, any balance repaid to HUECU by the University will be added to my e for relevant income taxes on that amount.
agreement does not preclude Harvard Unive	t may remain outstanding upon separation of my employment. This rsity, the Harvard University Employees Credit Union, and/or HUCTW ct any balance due upon default, including failure to pay upon my
In addition I acknowledge and affirm the fol	lowing:
1. I am included in the Harvard Union of Cleri	
2. I am a member in good standing of the Ha 3. I am using the proceeds of this loan to pay ownership of a house or condominium.	expenses related to moving expenses incurred while transitioning into
•	an is an extension of credit and as such is subject to credit reporting and
	more than one Home Owner Moving Expense Loan, or any other no-
interest loan through the Credit Union, outst	anding at any time.
employment, Harvard University, the Harvard including the right to collect the balance from	ing my failure to pay the balance of the loan upon my separation from d University Employees Credit Union, and/or HUCTW reserve all rights, n my pay, record any defaults paid by the University as taxable income, ation against me, and/or report my default to credit bureaus.
	Date
Affiant (HUCTW/HUECU member)	Date
	Date
HUFCU Witness	

Amount Authorized \$\_\_\_\_\_