

Plan #:

Social Security #: - -

Employee Name:

I. Enter Loan Prepayment Amount

I wish to prepay the entire loan balance currently outstanding under my account.

***NOTE:** A certified check, cashier check or money order (no personal checks) made payable to: **State Street Bank and Trust** equal to the total identified below must accompany this form. The original loan check cannot be accepted as prepayment of a loan. Please include your Plan Number on the check.

Prepayment Amount: \$, .

Important! Please contact ADP Retirement Services at 1-888-801-3534 for an exact loan payoff. Representatives are available Monday through Friday, 9 A.M. to 5 P.M. E.T.

Regular Mail:
ADP NJ CRS
P.O. Box 13399
Newark, NJ 07101-3399

Overnight Mail:
ADP C/O FIS
Attention: Lockbox 13399
400A Commerce Boulevard
Carlstadt, NJ 07072

II. Acknowledgement and Signature

Signature of Employee/Participant

Date

Name of Housing Agency

Daytime Phone Number

If you would like to take out a new loan please contact ADP Retirement Services at 1-888-801-3534. Representatives are available Monday through Friday, 9 A.M. to 5 P.M. E.T.