

\*A SEPARATE FORM IS REQUIRED FOR EACH LOAN PAYMENT THAT IS SKIPPED!



**SKIP-A-PAYMENT AUTHORIZATION FORM**

Member Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Home Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ E-mail \_\_\_\_\_

Home Tel: \_\_\_\_\_ Work Tel: \_\_\_\_\_ Cellular #: \_\_\_\_\_

Yes, I would like to skip a loan payment for the month of: \_\_\_\_\_

**SKIP-A-PAYMENT INFORMATION**

Loan #: \_\_\_\_\_ Amount of Payment: \$ \_\_\_\_\_

Please Debit the Fee from Account #: \_\_\_\_\_  Savings  Checking

**Member Agreement**

I  
Interest will continue to accrue during the deferral period extending the original term and increase the amount of finance charges. I understand that a payment will be added to the loan at the time of maturity extending the life of the loan by one month. Finance charges will continue to accrue on a daily basis at the APR set forth in the loan agreement at loan disbursement. Offer excludes Mortgage loans, Home Equity Lines of Credit, and Credit Cards. Cosigners on any loan must also sign the skip-a-payment request, and all loans must be up to date. A \$30 fee applies to all skip-a-payments. Only one skip-a-payment allowed per loan in a 12 month period.

By signing below, I have read and understand the member agreement. I understand that I will be contacted if the Credit Union cannot honor my request.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Co-signer \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

**For Internal Use Only**

Date Received: \_\_\_\_\_ Date Implemented: \_\_\_\_\_

Received By: \_\_\_\_\_