

Skip-a-Payment Application

Please Select:			
Skip my payment for the month of		for my loan #	
Skip my payment for the month of		for my loan #	
Skip my payment for th	e month of	for my loan #	
Name:			
Member Number:			
Home Phone Number		Other Phone Number	
Signature		Date	
I understand that my monthly loan payment n Payment Skip will have the effect of extending during the skip month and be repaid with the form. Members that are delinquent are not elig Second Mortgage loans, Home Equity Loans, a	nay be deferred if I have made a the loan maturity one (1) mon next payment. All parties signir gible for a Payment Skip. Exclud and Certificate of Deposit Loans ular period as determined by th	Union, I am requesting that my monthly payment be defer t least three (3) consecutive payments to the loan. Approval h past it's original maturity date. Interest will continue to ac- ig on the original promissory note must sign the Payment Sk ed from eligibility of a Payment Skip includes: First Mortgage The loan payment Skip is given to Members for temporary is a Board of Directors and will not exceed more than two (2) st	of a crue kip e Loai relief
Your savings federally insured to at least \$250,000 and backed by the full faith and credit of the United States Government	CREDIT UNION USE	ONLY	