

SKIP A PAY APPLICATION

Please Print

Name:	Account Number:				
Address:					
City:	State		Zip Code:		
Home #: Cell	#:		Work #:		
Email:					
Skip Loan Number(s): ##	_#	.##_	#	#	#
Month to Apply Skip-A-Pay: June	_ July_		August		_
When op	ting for Skip-	A-Pay, Keep in M	lind:		
*ACH Credits and payroll deductions will still be processed and deposited into the savings account. *You make skip a payment on all qualifying loans. *There is a processing fee of \$25.00 loan. The fee(s) will be deducted from your share or checking account. *The loan cannot be past due	 * Interest will continue to accumulate on the loan(s) during the month the payment(s) is skipped. *Skipping the payment(s) will result in an increased finance charge and will extend the term of the loan(s). *Offer subject to approval and does not apply to the first payment of any loan. 				t(s) is an end t
Signature:	Date:				
If you have a co-maker on yo	ur loan(s), th	e co-maker MUS	T sign below.		
Signature:	Date:				
Qualifications: The following loan types are NOT eligible for Skip-A-Pay:					

- Pay Day Alternative (PAL)
- High Risk
- Loan Modifications
- *All member loans MUST be current
- *All member accounts MUST be in good standing

PHONE: (985) 643-1237 FAX: (985) 643-4651