## **Skip-A-Payment Form**

## Give yourself some extra money – Skip-A-Payment

Give yourself some extra money with the EKYFCU Credit Union Skip-A-Payment program. With this program, you'll have the opportunity to skip one month of your Car, RV, Motorcycle, UTV, personal loan or line of credit payment(s). You will enjoy the extra money for the holidays, vacations, home improvements or travel expenses – you decide!

## Details about the program:

- There is a \$30 processing fee for each loan you choose to skip. Fee must be available in a EKYFCU account or paid with cash; fee cannot be added to loan balance.
- Your Skip-A-Payment application must be received at least 5 days before payment is due, but no more than 30 days prior to the due date.
- Skip-A-Payment is available for 2, non-consecutive months of the year.
- Interest will continue to accrue during the deferral period.
- All requests are subject to review and/or approval.
- You may return your completed application to EKYFCU, 122 N. Lake Dr., Prestonsburg, KY 41653, fax to (606) 263-4957, email to info@ekyfcu.com, or deliver it to the credit union office.

If you have any questions, call a Member Service Representative at (606)263-4956

Fill in form on page 2 and return by mail, fax, or office visit

## Which loans do not qualify for Skip-A-Payment?

- Workout Loans
- Loans currently delinquent or delinquent in the last 12 months
- Accounts not in good standing
- Loans with less than 6 on time regular monthly payments posted
- Loans with 2 processed skip-a-payments in the current calendar year
- Loans with any collection extension or payment reduction activity during the life of the loan



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	<b>Skip-A-Payment Form</b>

<b>Return this Form</b>		
Mail to:	Fax to: (606) 263-4957	
Eastern Kentucky FCU Attn: Skip-A-Payment 122 N. Lake Dr. Prestonsburg, KY 41653	Email to: <u>info@ekyfcu.co</u>	<u>m</u> or bring to the credit union office
Name:	Member/Account #:	
Home Address:	Daytime Phone:	
	Skip Payment for:	(month)
Loan Number	Payment Amount	Take \$30 fee(s) from my
		Savings 🗖
		Check 🗖

	Total Fees:	
normal loan payment(s)* and/or visa payment* due the following month, and hereby acknowled during the extension period at the same rate(s) a	e undersigned do hereby request a one-month extension of for the agreed upon month with my/our regular payment(s dge that I/We understand that interest will continue to accr as the original contract(s) and that the term or approximate extended due to this request. I/We understand this applica	s) rue e

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Primary Member's Signature

X If Applicable: Co-borrower or Co-Signer's Signature

For Credit Union Use Only:
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Approved
Denied

Employee Initials

Date Received

Comments

Date

Date

Cash