



Skip-A-Payment Request Form

At VATAT Credit Union we understand that unexpected expenses or situations might arise to put a strain on your budget, and we would like to help alleviate some of that strain by providing you the opportunity to skip a payment on one or all of your loans.

Simply submit this form by fax, e-mail or mail at least 10-days prior to the due date you wish to skip.

Eligibility: Loans must be in good standing for at least the past 6 months.

Limit one skip-a-payment per 12 month period/per loan. Requests will be charged a \$25 fee per loan.

Member Name: _____ Account Number: _____

Loan Number(s): _____ Desire Month to Skip: _____

Address: _____

Personal Telephone#: _____ Work Telephone#: _____

Primary Email: _____ Secondary Email: _____

All requests to skip-a-payment are subject to credit union approval. By signing this request form you agree to amend the terms of your original loan agreement and to repay the entire unpaid balance and accrued interest. All accounts at the credit union must be in good standing.

I understand that the interest will continue to accrue during the deferred period. I understand that this will extend the term of my loan.

Borrower's Signature: _____ Date: _____

Co-Borrower's Signature: _____ Date: _____

Please return form via mail, fax, or scan and email it.

FOR CU USE ONLY

Processed by Loan Officer: _____ Date: _____