

# Skip A Payment

## Loan Extension Agreement

- Yes, I/we want to take advantage of the C&CCU Skip-A-Payment offer.

Name/s \_\_\_\_\_

Account # \_\_\_\_\_

Phone# \_\_\_\_\_

Email Address \_\_\_\_\_

It is mutually agreed by the Borrower(s) and Catholic and Community Credit Union that, the \_\_\_\_\_ 20\_\_\_\_, payment on Loan # \_\_\_\_\_ will be deferred and extended to the end of the original term of this loan. All other terms and provisions of the original loan agreement are unchanged and remain in full force and effect. A \$25.00 processing fee will be assessed.\*

Signature of Borrower \_\_\_\_\_

Signature of Co-Borrower/Co-Signer \_\_\_\_\_

**All Borrowers and Co-Borrowers must sign this agreement**

\*Some restrictions will apply.

**Delinquent Loans do not qualify. Any loans extended during the previous 12 months do not qualify for this program. Loan(s) must have a minimum of six (6) months in payments made to qualify to skip a payment.**

**Only one (1) Skip-A-Payment will be allowed in a twelve (12) month period.**

**This Skip-A-Payment is not automatic, it MUST be approved prior to any payment being skipped. If you have GAP insurance more than 2 payments skipped will affect any GAP insurance payout.**

**www.candccu.com**

**618-233-8073 FAX 618-233-1033**

**Please mail form, fax, email or bring to West Main Street branch.**