

Skip a Payment Request Form

To apply, simply complete the information requested and mail, fax, email or bring to our office, along with your check for the skip fee(s). **Please don't send cash.** If you prefer to have the fees deducted from your **FedONE Federal Credit Union** checking or savings account, check the appropriate box. *Real Estate Loans are not eligible.*

MAIL COMPLETED FORM WITH CHECK TO:

FedONE Federal Credit Union
 Attn: Loan Department
 P.O. Box 6545
 Laguna Niguel, CA 92607

Fax: (949) 831-0928
 fedoneloans@fedonefcu.org

This Addendum amends your Loan Disclosure Statement and Agreement regarding your loan payment. By signing, you understand and agree to the following terms and conditions and request that FedONE FCU extend the due date of your regular payment(s) by one month, for the month indicated on this form. You agree to pay a skip payment processing fee of \$20.00 per loan. If there are not sufficient funds in your account to cover the fee, the processing fee will not be deducted and the payment will be due on your loan(s) in accordance with your disclosure statement and agreement. You understand that interest will continue to accrue on your entire loan balance, including the amount of the skipped payment, and that skipping this payment means it will take longer to pay off your loan.

FedONE FCU reserves the right to refuse to honor this request if all terms of the disclosure statement and agreement have not been met at the time this addendum is presented. All loan payments must be current with NO late payments within the last 12 months to qualify and the membership in good standing. The loan must be at least six months old. All other payment terms of your Loan Disclosure Statement and Agreement will remain in full force and effect. Offer excludes all real estate loans. You may not skip a payment if the skip payment will cause negative amortization on your loan.

Payroll deduction will not be interrupted. The funds will remain in your account for withdrawal.

We must receive your signed request no later than seven business days before the date of the requested skipped payment. Approval subject to credit qualification.

 Complete online, Print, & Mail or Fax

1. I would like to skip my December 2018 January 2019 loan payment. *(Select one month only.)*
There will be a \$20.00 fee for each skipped payment.

2. The loan(s) I would like to skip is/are:

Loan No. _____ Loan No. _____ Loan No. _____

3. Please print clearly:

Name: _____ Account #: _____
 Address: _____ City/State/Zip: _____

4. Let us know how you wish to pay the \$20.00 Skip A Payment processing fee for each loan indicated: *(check one below)*

Check payment (enclosed) Deduct from my
 Deduct from my FedONE FCU savings acct# _____
 Deduct from my FedONE FCU checking acct# _____

If submitting form electronically, your typed signature indicates acceptance of terms.

 Borrower Signature Date