## **CACL Skip-A-Payment Request Form**

Use this authorization form each time you want to skip your next monthly payment on an eligible CACL loan. You must complete one Skip-A-Payment Request Form per eligible loan.\*

Return completed form (with \$35.00 fee if paying by check) in person to CACL Federal Credit Union 1800 West Market Street Pottsville, PA 17901

Form and fee must be received by CACL in the month prior to the loan payment you want to skip.

| Name:  | Member #:                    |  |  |
|--|------------------------------|--|--|
| Email Address:   | Phone #:                     |  |  |
|  |                              |  |  |
| Payment You Wish To Skip   |                              |  |  |
| Skip my next monthly payment on the following loan:  |                              |  |  |
| Loan Number:   | Loan Type:                   |  |  |
| Processing Fee Options   |                              |  |  |
| I would like to pay the \$35 Processing Fee from:  |                              |  |  |
| Account Number:  | Share Number:                |  |  |
| Signature  All parties to the original loan agreement, Including Co-Borrowers, Must sign below:  |                              |  |  |
|  |                              |  |  |
| Borrower's Signature Date  | Co-Borrower's Signature Date |  |  |
| *I must be a member in good standing with all of my loans current to participate in C<br>three (3) months of the loan agreement. Loans are limited to two (2) Skip-A-Pavs pe |                              |  |  |

\*I must be a member in good standing with all of my loans current to participate in CACL's Skip-A-Pay Program. This program is not available on loans during the first three (3) months of the loan agreement. Loans are limited to two (2) Skip-A-Pays per calendar year (cannot be consecutive months). There is a \$35.00 service fee to skip each payment on each loan. Not offered on Mortgage, Home Equity Line of Credit, Fresh Start, Line of Credit, Payday Alternative. Finance charges will continue to accrue on a daily basis at the Annual Percentage Rate set forth in my loan agreement, both during and after the deferral period. This means that this deferral of scheduled payments will result in my having to pay higher total Finance Charges and possibly a higher total number of payments, than if I made my payments as originally scheduled. I will, therefore, have to make extra payment(s) after my loan would otherwise have been paid off. In all other respects, the provisions of my original agreement remain in full force and effect. I agree to contact the Credit Union for exact payoff information. I agree that I will resume making scheduled payments beginning with the payment due during the month following the deferral and will make all scheduled payments due thereafter. I understand that all these payments will be applied first to finance charges and late charges, if any, and then to principal. My next monthly payment will include the finance charges from the skipped month. Monthly premium for payment protection will still be added to the loan on the skipped month.

| Internal Use Only |         |            |
|-------------------|---------|------------|
| Member #:         | Loan #: | Teller ID: |
| Month Skipped:    | Fee:    | Date:      |