



## Skip-A-Payment Request Form

Please fill out all the fields below. One of our representatives will contact you to complete the process. Please read the following regarding our skip-a-payment policy:

Please complete one (1) request form per loan.

By completing this form you are requesting that Atlantic Financial FCU skip a payment on the loan indicated below.

Service fees apply and funds for this fee must be available in your account or submitted with this request.

- A \$30 fee per loan per payment skipped for monthly payments.
- A \$15 fee per loan per payment skipped for bi-weekly payments.
- A \$10 fee per loan per payment skipped for weekly payments.

Skipping a payment will extend the repayment period/term of the loan and finance charges will continue to accrue on the unpaid principal balance during the skip period.

### Restrictions

- Payment can be skipped after six (6) monthly payments have been made.
- All vehicle loans that have GAP protection are limited to one (1) skip-a-payment per year up to a maximum of four (4) over the life of the loan.
- Not eligible on: first or second mortgages, certificate secured, Visa cards, Summer Breeze or Holiday Helper loans.

Please check the number of payments requesting to be skipped:

Monthly: 1  Bi-weekly: 1  2  Weekly: 1  2  3  4

Name: \_\_\_\_\_

Account Number including Loan Suffix (i.e. 0001234567 L01): \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work/Cell Phone: \_\_\_\_\_

Deduct the appropriate processing fee from:  Savings  Checking  Attached Check

I authorize Atlantic Financial to skip one (1) loan payment on the loan identified above. I agree to be a) bound by the policy statement above; b) acknowledge that finance charges continue to accrue on a daily basis on my unpaid balance; c) that this authorization amends the original loan agreement; and d) that skipping a payment may change the total amount of interest due on the loan the repayment schedule/term of the loan.

\_\_\_\_\_  
Signature and Date

\_\_\_\_\_  
Co-borrower (if necessary) and Date

Return this completed authorization to us at:  
Atlantic Financial Federal Credit Union Or fax to 410-584-8061  
40 Schilling Rd.  
Hunt Valley, MD 21031