



**SKIP – A – PAY
AUTHORIZATION FORM**

I would like to postpone my Health Advantage Federal Credit Union loan payment*. I understand that interest will continue to accrue during the skip period. By skipping this payment, the term of the loan will be extended one month. After the end of the skip period, the regularly scheduled payments will resume. If you have automatic payment set up through another financial institution for the payment you wish to skip, you must notify that financial institution so that the payment will not be automatically sent by them.

I understand that I will be charged a \$35 processing fee for each postponed loan to be deducted from my HAFCU account. Please complete the information below:

Please deduct _____ (\$35 for each postponed loan) from the following account:

Account Number: _____ Savings Checking

Please complete the information below indicating the loan suffix and payment amount of the loan(s) you wish to postpone.

**Qualifying loans to be skipped must be current to consider. First mortgages, second mortgages, home equity loans, credit cards, lines of credits, commercial or business loans, TDR/workout loans, or any loans that have not had at least three monthly payments applied are not eligible for this offer. Members can have one skip a pay plan in any six month period, but no more than two in a twelve month period.*

Account Number	Loan Suffix	Loan Payment Amount	Month to Skip

I authorize HAFCU to postpone my payment for the month(s) stated above on the specified loans. I understand that the interest will continue to accrue on my loan(s) during the postponed payment period. The credit union reserves the right to withdraw this offer on an individual basis subject to payment history and criteria.

Primary Member Signature: _____ Date _____

Co-Signer Signature: _____ Date _____

(Required if loan has a co-signer)

Daytime Phone Number: _____

For Internal Use Only	Processed by: _____	Date: _____
------------------------------	---------------------	-------------