



Skip-A-Payment Program Application

*A non-refundable \$25 processing fee is required per loan.
Return application to credit union office, or fax to (404) 607-8252.
by November 16, 2017.

Name: _____ Account #: _____

Social Security #: _____ Email Address: _____
(Required. Decisions will be emailed only.)

Address: _____ City /State _____ Zip Code _____

Home #: _____ Work #: _____ Cell #: _____

Please identify the loan type and/or number in which you want to be included in the Skip-A-Payment Program.

By signing below, I agree to the contractual terms of the Loanliner agreement for all loans approved to be deferred for the month of December. A \$25 skip-a-pay fee will be deducted from the Share Account noted above on November 30, 2017.

Signature: _____ Date: _____

The following loans are not eligible for the Skip-A-Program:

- LOC (line of credit)
- 1st and 2nd Mortgage
- MasterCard
- Quick Cash
- Jump Start
- Credit Builder
- Over Draft
- Loans made after May 1, 2017

***Items required prior to reviewing your application. Fee will be deducted from the member's checking or savings account with 1st Choice Credit Union.**