

SKIP-A-PAYMENT AUTHORIZATION FORM



FAIRFAX COUNTY®
FEDERAL CREDIT UNION
Your Community Credit Union

Complete and sign form. Drop it off at any branch, fax it to 703.591.4168, or mail it to us at FCFCU, P.O. Box 1300, Fairfax, VA 22038.

YES! I would like to skip a payment on my loan for the following month(s):

Loan Type	Monthly Payment	Month(s) to Skip Check up to 2 per loan		
		July	August	Sept.
<i>Ex: Car Loan</i>	\$545	X	X	

For Internal Use Only

Date Received: _____ Received By: _____ Date Implemented: _____

Member Name (Please print)

Address

Account Number

Home Phone

Cell Phone

Deduct processing fee from my:

Savings account

Checking account

Check enclosed from another financial institution

MEMBER AGREEMENT: A \$30 fee applies to each skip-a-payment per loan per month. Two skip-a-payments allowed per loan in a 12-month period. Your account must be in good standing with no negative balances & all loans must be paid as agreed with a minimum of 12 consecutive on-time payments in order to qualify. Interest will continue to accrue during the deferral period, extending the original term & increasing the finance charges. I understand that a payment will be added to the loan at the time of maturity extending the life of the loan by the number of months skipped. Finance charges will continue to accrue on a daily basis at the APR set forth in the loan agreement at loan disbursement. **Offer excludes real estate loans, student loans, overdraft protection loans & Visa credit cards. Co-signers on any loan must also sign the skip-a-payment request. Offer valid from 7/1/2017 through 9/30/2017.**

Signature

Date

Co-Signer Signature (If applicable)

Date