



Skip-A-Loan Payment Request

Select up to 3 months per calendar year to skip a loan payment: Year: _____
Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

Yes I understand that this request is only for Auto, Signature, Recreational Vehicle/Boat, Motorcycle/PowerSport, and Share Secured Loans

Member Name(s): _____

Member Account Number: _____

Loan Description(s): _____

Phone Number: _____ Email: _____

Fees & Discount: Each skip is \$35 per loan, or prepay for 3 months for \$99. Even if you choose to skip a third month later on, the discount will still be applied and your third skip will be charged at \$29, totaling \$99 for the year.

Transfer \$35 Fee From: Share Savings Checking Check Enclosed

* All requests to skip a payment must be approved by the Loan Department. By signing this request, you agree to amend the terms of your original agreement and to repay the entire unpaid balance and accrued interest. Interest will continue to accrue on unpaid loan balance during the no payment period. Mortgages, Home Equity Products, Lines of Credit, Visa Credit Card Loans are not eligible.

Eligibility Requirements: All credit union accounts must be in good standing, member-owner must not be in bankruptcy, or have an open workout loan. Qualified loans must meet the following criteria:

- More than 3 months old and at least one payment must have been made
- Have a monthly payment of more than \$100/month
- Original loan term must be longer than 24 months
- Members may skip up to 3 monthly payments per calendar year. Skip requests may be submitted at any time during the year — you do not need to submit all three at once.
- Skip-A-Payments may not exceed a combined total of 9 during the original loan term.

Note: Original, faxed, or DocuSign signature required below.

Borrower Signature: _____ Date: _____

Joint Account Signature: _____ Date: _____

Send this request to ECS before the due date of the payment you would like to skip.

- Mail or drop off to the address below or
- Fax to: 619-588-2197 or
- Scan and email to memberservice@ECSFCU.org
- Call or text SKIP to 619-588-1515 and a copy will be sent to you via DocuSign

INTERNAL USE ONLY

Date Request Received: _____

New due date FM: _____ Initials _____

Is payment payroll/ACH Yes No Accounting Dept Contacted _____ Initials _____

Skip-a-Pay Fee Received \$ _____

Fee Charged to Share _____ Date _____ Initials _____

Share Comment: SKIP A PAYMENT FEE

GL 130550 GL Description: Skip Fee – Last Name / Member Number / Loan ID

Loan Comment (LC): Skip A Pay, skipping xx/xx/xxxx payment