



PRESTIGE

COMMUNITY CREDIT UNION

PO Box 802631 Dallas, TX 75380
972-715-4444 Fax 972-239-2519
www.prestigecu.org

Credit Union Use Only	
Name: _____	_____
Account Number _____	Date _____

Skip-A-Payment Request

Primary Owner

Name (Last, First, Middle) _____

Member Number _____ SSN _____

Address (Street, City, State, ZIP) _____

Home Phone _____ Cell Phone _____ Email _____

Payments You Wish to Skip

Auto Loan (Make and Model) _____ Payment Date to Skip _____

Personal Loan _____ Payment Date to Skip _____

Other (Loan Type) _____ Payment Date to Skip _____

Processing Fee Options

There is a \$25.00 fee for a Skip-A-Payment per loan. You may pay by cash, check or have the amount deducted from one of your credit union accounts. Please check which method of payment you prefer.

Cash Check CU Account _____

Loan Payment Method

Please indicate how we receive your loan payment each month so that the request can be processed properly.

ACH (Automatically from another bank account) AUTO (Automatically from a Prestige CU account) COUPON (mail check or credit card payment)

Signature and Authorizations

You must be a member in good standing and all of your loans must be current to participate in Prestige's Skip-A-Payment program. Mortgage loans, Home Equity loans, Credit Cards, Vacation loans, Line of Credit, Certificate of Deposit loans, Quick Cash loans, Courtesy Pay loans, Balloon loans, Credit Builder loans and Leases are not eligible. Skip-A-Payment program does not apply to loans during the first six (6) months of the loan agreement. No more than 2 Skip-A-Payments or Loan Extensions per calendar year per loan and no more than 5 allowed over the life of the loan. A minimum of 6 months are required between loan extensions. Any loan delinquent over 30 days in the past 12 months is not eligible for the Skip-A-Payment program.

By signing below, you authorize Prestige Community Credit Union to advance your loan due date by one month on the loan indicated and acknowledge that this may extend the maturity date of the loan. You acknowledge that this request does not change your legal obligation to the Credit Union, that your loan agreement with the Credit Union provides for regular monthly payments, and that the Credit Union is merely informally permitting you to defer payment for the month indicated above. Interest will continue to accrue on the unpaid balance during the month you skip a payment. When payments resume, unpaid interest will be collected first. If approved, your regular monthly payment will resume immediately following the month you indicate above. Skip-A-Payment voucher must be received by the Credit Union at least ten (10) days prior to the loan due date for the month indicated above. Prestige Community Credit Union reserves the right to refuse any Skip-A-Payment request. If loan was cosigned, cosigner must sign to process Skip-A-Payment request.

Member Signature _____ Date _____

Co-signer Signature _____ Date _____

Credit Union Use Only

Approved Denied Update Auto Distribution Stop & Start ACH form to Accounting

Authorized Signature _____ Date _____