This agreement must be signed by all borrowers, co-borrowers, and cosigners.

Please note that Home Equity Loans and Delinquent Loans are not eligible for deferral. Also loans granted after September 1, 2026 are not eligible for deferral.

☐ **YES! I WANT TO TAKE ADVANTAGE OF THE SKIP-A-PAYMENT**

Name: _____ **Account Number:** _____

Loan(s) Number: _____ **Daytime Phone:** _____

_____

Please indicate which payment you would like to skip:

☐ **November 2026** ☐ **December 2026** ☐ **Bi-Weekly Payment**

I understand that the terms and conditions of my loan agreement still apply except that there will not be any regular monthly payments required on the approved requested deferral period. Afterwards, I must make my regular monthly payment(s). I understand that the finance charge(s) will continue to accrue during the deferral period. I understand that deferral of my regular payment(s) will result in having to pay a higher total finance charge, and that my loan repayment schedule will be extended. I also understand that the Credit Union reserves the right to terminate this offer at any time. I understand that loans being paid through Trustage Disability Insurance are excluded.

VISA Credit Card Skip-A-Pay . The skip-a-pay will only be available in December. Please see your upcoming credit card statement for more information. The credit card finance charge will continue to accrue as normal. The monthly minimum payments will resume in January 2027.

_____ _____

BORROWER SIGNATURE **CO-BORROWER SIGNATURE**

☐ **I have a loan with another financial institution. I would like information about how CCNCU can help me take a break from a payment on this loan as well.**