

Skip-A-Payment Request

Member Name: Street Address: Cell Phone #:		Acc	City/State/Zip:	
		City		
		Ema		
and are limited to Pay include Certi additional inform understand that Financial CU to v also acknowled accumulate, and with GAP coverag ife of the loan. A chan one skip-a-p	o one skip payment perificate Secured, Home nation is needed or if Statere is a \$20 non-refunderaw the fee from rege that by skipping my the loan term will be age, please note that the sa result, any addition payment is approved for	r loan within a rolling 12-month Equity, MasterCard, and Simpl TAR Financial CU is unable to a undable application fee per Appmy STAR Financial CU account. I loan payment, the total finance extended. Additionally, if I am ree GAP contract permits only on all skip-a-payments will not be	Jaccounts must be in good standing period. Loans not available for Skip-A-e Loans. Members will be contacted if pprove the Skip-A-Payment Request. I roved Loan, and I authorize STAR e charges on my loan will continue to equesting a skip-a-payment on a loan e (1) skip-a-payment throughout the covered under a GAP Claim. If more da GAP Claim is filed, any extra skip-a-nt.	
Please Skip	Loan:	for	(MM/YY)	
	Loan:		(MM/YY)	
	Loan:		(MM/YY)	
	Loan:	for	(MM/YY)	
Primary Borrower Signature:		Date: _		
Co-Borrower Signature:		Date:	Date:	
		For Internal Use Only		
Request Rece	ived by:	Date:	Eligibility Check	
Approved/Denied by: Last Skip-a-Pay Date:			□ No delinquency history in last 12mo□ No force placed insurance	
			on any CU loan All share accounts current No skipped payments in last 12mo *All fields are required*	

Any exceptions require CEO approval