

HomeTown Credit Union Skip-Pay Form

(Offered one time per year per loan)

Print Name: _____ Daytime Phone: _____

Skip payment offer excludes Visa & real estate loans. Please defer my loan payment(s).
Please contact me about skipping a payment on my loan(s) I have at another financial institution. _____ Yes _____ No

Deduct my \$39.00 processing fee per loan* from my:

- Primary Savings Account
- Checking Account
- I have enclosed a check payable to: **HomeTown Credit Union**

Member Number: _____ Month to be Skipped (one only) _____

Loan # _____ Payment amount to be skipped**: _____

Loan # _____ Payment amount to be skipped**: _____

Loan # _____ Payment amount to be skipped**: _____

*All Credit Union accounts must be in current status to qualify for this offer. All requests are subject to Credit Union approval. GAP waiver does not include any skipped payments.

**If your loan payments are made through payroll deduction, your money will be directed to your primary savings account for the month that you skip and will be re-directed to your loan(s) the following month. Skip-Pay will not be processed until payment of fee(s) is received.

I have read and understand this agreement. By signing and dating this form, I agree to all terms and conditions of the Skip-Pay Program and I agree to amend the terms of the original loan agreement(s) by one (1) month due to the skipped payment. I also agree to repay the entire unpaid balance of my HomeTown Credit Union loan(s) at the interest rate and according to the payment schedule stated on the original loan agreement(s), if applicable. Any faxed transmission of your signature may be held equally enforceable as your genuine signature.

Member Signature: _____ Date: _____

Complete and fax form to: 1-507-446-3809

Or mail to: HomeTown Credit Union

Attn: Lending Operations

2400 W. Bridge St.

Owatonna, MN 55060

Return form at least 7 days prior to due date