



P.O. Box 958471 • Lake Mary, FL 32795-8471
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Skip-A-Pay Application, Disclosure and Agreement

This Skip-A-Pay Agreement amends your Loan Agreement/Promissory Note and Disclosures with Addition Financial Credit Union. *Skip-A-Pay may only be applied once per rolling year per loan ID and only to the following loan types: Auto, Boat, Motorcycle, RVs, and Signature Loan/CEUN.

Please complete the following:

Borrower or
Joint Borrower Name: _____

Account Number: _____

Loan ID: _____

Month to Skip: _____

Phone Number: _____

Your loan must be due for the month you wish to skip in order for the Skip Payment to occur. If your loan is past due, the skip payment will not occur.

For payments you generate (ex. payments set up with a bill payment service, payments initiated at another financial institution, etc.) you are responsible for stopping the loan payment for the month you wish to skip. Any automatic transfers generated by Addition Financial will be suspended for the Skip-A-Pay month.

By signing below, I request to skip the payment referenced above, and I am requesting Addition Financial to extend the due date of my regular monthly loan payment by one month. I further agree to all the provisions of the Skip-A-Pay program as described in this disclosure. **I understand a _____ application fee (which is a FINANCE CHARGE) will be applied for each payment skip requested and will be withdrawn from my Addition Financial Account at the time of my request.

Borrower or Joint Borrower's Signature

Date

*All Addition Financial loans must be current with no collection action pending. All accounts must be in good standing.

**A separate Skip-A-Pay Application, Disclosure, and Agreement must be completed for each loan the borrower(s) wish(es) to skip. The Skip-A-Pay Application fee cannot be financed into the loan. Other restrictions may apply. All other payment terms of your Loan Agreement/Promissory Note will remain in full force and effect. Skipping one or more payments will extend the term of your loan and interest will continue to accrue. For auto loan payments, please check with your GAP protection carrier to determine how Skip-A-Pay may affect your coverage.

FOR CREDIT UNION USE ONLY: Approved by User ID #: Date: _____