

Skip-a-Pay for More Cash!

NOW OFFERING TWO TO THREE SKIP-A-PAY OPPORTUNITIES IN A 12-MONTH ROLLING PERIOD!*

In these current economic times you can probably use some extra cash to pay for it all. Now you can skip a Hudson Heritage Credit Union loan payment on one of your personal and/or auto loans, leaving you more money to do the things you want! To skip a loan payment, just fill out the form below and return it to Hudson Heritage CU.

Name _____ Member # _____

Address _____

Daytime Phone # _____ Email address _____

APPLY SKIP-A-PAY TO: ☐ PERSONAL LOAN ☐ AUTO LOAN ACCOUNT # _____

SKIP-A-PAY MONTH: _____

CURRENT METHOD OF PAYMENT: ☐ CHECK ☐ PAYROLL DEDUCTION ☐ ACH (AUTO TRANSFER)

PLEASE NOTE: HUDSON HERITAGE REQUIRES **TWO WEEKS NOTICE** TO PROCESS YOUR SKIP-A-PAY REQUEST. IF LOAN IS PAID BY ACH (AUTOMATIC TRANSFER) FROM ANOTHER FINANCIAL INSTITUTION, MEMBER MUST DIRECT FINANCIAL INSTITUTION NOT TO FORWARD PAYMENT TO HHCU DURING THE SKIP-A-PAY MONTH.

Acceptance of Terms: I/we understand that to participate in the HHCU Skip-a-Pay program my/our last three consecutive months loan payments must have been on time and my/our account must be in good standing. I/we understand that the finance charges will continue to accrue on the outstanding balance of the loan until it is paid in full. I/we understand that I/we are postponing the payment and extending my/our loan by one month. This will cause I/we to pay extra interest the month following my/our "skip". I/we understand that I/we continue to be responsible for the entire outstanding principal and interest of my/our loan, and that I/we will be responsible to continue to make the monthly payments after the original maturity date until all principal and interest is paid in full and that, if applicable, the pledge of security shall remain in effect until the loan is fully repaid. I/we understand that the next regular payment will be due on the scheduled payment date following the due date that I/we have elected to Skip-a-Pay. I/we also understand that for auto loans that include GAP coverage; in the event of a claim, the amount of GAP coverage will be reduced by the amount of the GAP payment skipped. If your loan is protected with Credit Life and/or Disability Insurance, the monthly premium will still be added to the loan during the month the loan payment is skipped.

Acknowledgment and Authorization: I/we wish to participate in the HHCU Skip-a-Pay program. Please defer payment for the loan indicated on this form.

By signing below, I (a) certify that I have the consent and authorization of ALL borrowers/guarantors/co-signers to agree to the terms of this Skip-a-Pay loan modification and (b) agree to hold the Credit Union harmless from any and all claims brought by any party challenging such consent and authorization or the validity of this voluntary loan modification.

Primary Signature _____ Co-Borrower/Co-Signer Signature _____

Name _____ Name _____

Loan Account _____ Loan Account _____

*The fee of \$30 is waived through the month of April and will be reassessed for the duration of the pandemic. One fee waiver per product. In order to skip your payment, all loans and accounts must be current and in good standing at the time we receive your request, and your loan must have opened at least 6 months prior to the date of application. In order to skip your payment online, you must use your Heritage iCliq account. This offer is subject to credit approval and does not apply to overdraft line of credit, credit card or real estate loans. HHCU reserves the right to deny Skip-a-Pay on any loan.

RETURN THIS SIGNED FORM TO:

HHCU SKIP-A-PAY PROGRAM
25 RYKOWSKI LN, MIDDLETOWN, NY 10941

COMPLETED FORMS CAN ALSO BE EMAILED TO: LOANSERVICING@CONTACTHH.ORG

