



# Skip-A-Pay!

Give yourself the gift of a little extra cash this season

**CoastHills**  
CREDIT UNION  
Banking the Central Coast Way

# Hit pause and give yourself a little extra cash.

Simply fill out this form or visit **CoastHills.coop**, log into Online Banking, select “additional services” and follow the simple steps.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Account number

(       )

\_\_\_\_\_  
Daytime phone number

X

\_\_\_\_\_  
Primary signature

\_\_\_\_\_  
Date

X

\_\_\_\_\_  
Co-signer signature

\_\_\_\_\_  
Date

## Which CoastHills loan(s) do you want to defer?\*

Offer is only available on consumer installment loans, and does not include credit cards, mortgages and lines of credit.

Loan # \_\_\_\_\_

Loan # \_\_\_\_\_

Loan # \_\_\_\_\_

I understand that I will be charged a \$35 processing fee for each loan on which I elect to skip a payment. The fee will be deducted from my checking or share account (please mark appropriate box below).

Checking account

Share account

Acknowledgement by Member(s): I acknowledge that this action may extend the maturity date of my loan. I also acknowledge that this request does not change my legal obligation with the credit union, that my loan agreement provides for regular monthly payments, and that the credit union is merely informally permitting me to defer payment for the current month. I understand that interest will continue to accrue on the unpaid balance of my loan during the month of the skipped payment. Payments I make will continue to be applied to fees, interest and principal balance in that order. By entering this program, I understand that the extension may delay repayment of principal, resulting in additional interest accruing over the life of the loan, and when full payments resume accrued interest will be paid prior to the principal balances. I also understand that the extension of the note may not be covered by insurance or any Guaranteed Asset Protection coverage.

Additional Requirements: I understand that I must be in good standing, that a minimum of five non-consecutive payments have been made to the loan, and that **all my loans must be in current order or within their grace period in order to participate in this program.** Maximum of two non-consecutive skipped payments per eligible loan and calendar year utilizing the skip-a-pay program. The Credit Union may terminate this program at any time. If approved, this request amends my loan agreement(s) and my regular month payment schedule will resume immediately following the month in which payment has been skipped.

**Email to:**  
**MemberServices@CoastHills.coop**

**OR**

**Mail to:**  
**CoastHills Credit Union**  
**P.O. Box 8000**  
**Santa Maria, CA 93456-8000**

\*If your loan payment transfers from another financial institution, please be aware that the funds will still be withdrawn from that account and instead be deposited to your CoastHills share account.

**Credit Union use only:**

Apv.

Den. \_\_\_\_\_ User ID