

Western Division Federal Credit Union
6750 Main Street • Williamsville, NY 14221
Ph: (716) 632-9328 • Fax: (716) 632-1383
www.westerndivision.org

Instructions:

- Download form to your desktop or documents.
- Complete and Save your information.
- Send to us by:

Email: memberservice@westerndivision.org (or)

Text: (716) 632-9328 (or) Fax: (716) 632-1383 (or)

Mail/Drop off to a branch location

SKIP-A-PAY REQUEST FORM

Member Name:

Membership #:

Date Received:

Terms and Qualifications:

- Eligible Loan Accounts: Vehicle, Recreational, Personal, Holiday and Fast Cash.
 - All accounts with Western Division must be in good standing for consideration of a Skip-A-Pay.
 - You must have had the loan open and made three (3) months of payments to be eligible for the Skip-A-Pay.
 - Skip-A-Pay can be used on each eligible loan a maximum of four (4) times during the duration of the loan term, but no more than two (2) non-consecutive months within a 12-month period.
 - Skip-A-Pay Request must be received ten (10) business days in advance of loan due date.
 - During the Skip-A-Pay month, interest will continue to accrue at the prevailing interest rate. Skip-A-Pay will extend the term of your loan and may effect life/disability claims.
 - You are required to resume your regular payment(s) the following month on the loan due date.
 - If you choose to skip your payment and your loan payment transfers from an outside service, you are responsible to contact the payment source to stop that month's payment.
-

Processing Fee(s):

There will be a \$30.00 processing fee/per loan and is required before a Skip-A-Pay Request will be honored. This fee does not apply toward interest or principal on your loan.

Fee(s) Total: \$

Debit Account #: ☐ Checking ☐ Savings ☐ Other:

Skip-A-Pay Request:

Account #:

Loan suffix:

Skip Date:

Account #:

Loan suffix:

Skip Date:

I hereby request Western Division FCU to apply this Skip-A-Pay Request for the accounts indicated above. I understand and agree to the terms, conditions and fee(s) associated with this request. Furthermore, I understand that all Skip-A-Pay applications are subject to approval and requests are not guaranteed to be approved.

Signature: _____

Date: _____