

# AHCU Skip A Pay Request & Authorization Form



You may qualify to skip your closed end consumer loan or credit card payment once per rolling 12 month period, per loan. For your convenience, you may choose the month below that works best for you. Use this form each time you would like to request a Skip A Pay for one of your eligible AHCU loans.

Skip A Pay is eligible for closed ended consumer loans and credit card accounts open greater than six (6) months; accounts must be in good standing and not delinquent or in default. A **\$35.00 processing fee** is required for each Skip A Pay processed. If any loan does not meet the qualifications, you will be contacted either by the phone number or email address on your account with AHCU.

**All borrowers on the loan MUST sign the form in order to process the request.**

Complete the Request and Authorization Form and choose either to deduct the fee from your AHCU share or checking account or enclose a check made payable to AHCU for the amount of the fee. The fee cannot be added to your consumer loan balance.

Bring this completed form to the closest available branch location or you may mail it to our Coon Rapids office:

**AHCU**  
**Attn: Skip A Pay Request**  
**3505 Northdale Blvd NW**  
**Coon Rapids, MN 55448**

This request form must be received no less than 10 business days prior to your loan due date to ensure sufficient processing time.

## Skip A Pay Request Information *(Please complete a separate form for each skip request)*

Member #: \_\_\_\_\_ Date of Request:    /    /   

Member Name *(please print clearly)*: \_\_\_\_\_

1. Indicate the month you want to skip:  November 2021  December 2021  January 2022  
(Select One Only)

2. Indicate the loan you want to skip: \_\_\_\_\_  
(Loan Number or Loan Type)

3. Deduct \$35.00 fee from:  AHCU Checking  AHCU Savings  Check Payable to AHCU  
(Per Loan)

## Disclosure and Authorization

I/We understand that by submitting this request to Anoka Hennepin Credit Union (AHCU), I/we are requesting to skip the monthly payment indicated above on the indicated loan. I/We also understand that interest will continue to accrue on my/our outstanding balance during this time and the term of my/our loan may be extended. I/We understand that if I/we fail to submit this request within 10 days before the due date of the monthly payments I/we would like to skip, my/our normal loan payment will be due on the normal scheduled due date; or if subject to transfer will be made on the scheduled due date. Should this occur and funds are not available to complete my/our normal loan payment, I/we may be subject to Late Fees as outlined in my/our loan agreement(s). Payments made cannot be refunded. AHCU reserves the right to revoke this offer if any of my/our account(s) are in default or if I/we fail to meet any other condition or criteria of this offer as specified herein. I/we understand that this request can only be used for the specified loans and is only available for one skip per loan per rolling 12 month period, this includes previous skip requests due to hardship. The offer does not apply to real estate secured loans, business loans, GPS loans, Drive4Less Loans, Relief Loans or open ended lines of credit with the exception of credit cards. Payments made by credit union transfer or AHCU loan origination from another financial institution will be suspended for the month skipped. I /We understand after the skip payment period my/our normal monthly payment will resume on the first due date following the skip payment period. I/We understand that I/we will be responsible for stopping payments made by Bill Payment initiated either through AHCU or another financial institution and re-initiating the bill payment after the skip period. A \$35 fee will be assessed for each Skip A Pay processed. The fee cannot be deducted from your \$5 minimum share balance and the payment will not be skipped unless the fee has been paid. Payment amounts of \$100 or less are not eligible for Skip A Pay. Mastercard statements will continue to cycle and be delivered during the month that is skipped. Qualifications and restrictions apply. Offer subject to change or termination.

Member Signature: \_\_\_\_\_

Joint Member Signature, if applicable: \_\_\_\_\_  
(Required if loan is joint)



FOR CREDIT UNION USE ONLY - Received by (initials): \_\_\_\_\_

763.422.0290

ahcu.coop

