



REQUEST FOR DEFERRAL OF INSTALLMENTS

Date of request: _____

Member name(s): _____

Account Number(s): _____

Home Address: _____

Contact Number(s): _____

Email Address: _____

Occupation: _____

Employer: _____

Employer Address: _____

Contact Number(s): _____

As a result of the impact of the COVID-19 pandemic on my finances, I hereby request a deferral of my ordinary loan installment for a period of: *(Tick the appropriate Option below)*

One Month

Two Months

Three Months

Submitted at

Fitt Street Office

Website

Via Phone

Member Signature: _____

Credit Union Staff Signature: _____

FOR OFFICIAL USE ONLY

Date received: _____

Received By: _____

Approved By: _____

Requirements

1. Letter from Employer
2. Pay slip (once in receipt of same)
3. Bank Statements - self employed
4. Letter from member detailing difficulties being experienced as a direct result of COVID-19

FILE MEMO

Last Loan Dated: _____ **Ref #:** _____ **Loan Type:** _____

Principal Only:

Principal & Interest:

Mr./Ms./Mrs. _____ was advised that the request for deferral of loan instalment(s) will result in an extension of the maturity date of the loan as per reference number above.

I understand that upon resumption of loan installment(s), interest first would be allocated as per WESCU Loan Policy and thereafter payment to principal after the accrued interest is repaid.

Member's Signature: _____

Credit Union Staff Signature: _____