

Consumer Loan Extension Application

Borrower Name:	Member Number:	
Daytime Phone Number:		
Home Address:		
Borrower Employer Name/Phone Nu	mber:	
Borrower Monthly Income:		
Borrower Position:		
Co-Borrower Name:		
Daytime Phone Number:		
Home Address:		
Co-Borrower Employer Name/Phone Number:		
Co-Borrower Monthly Income:		
Co-Borrower Position:		
Extension Reason:		
Reason for Extension Request:	oss of Job □Reduced Pay □Increased Expenses	
Other: please add a description of reason for hardship:		
Loan# Payment Amount Lo	an Balance Month(s) to extend	

I/We the undersigned do hereby request an extension of our normal loan payments(s) and/ or credit card payments.

I/We understand that for consumer loans interest will continue to accrue during the deferral period at the same rate(s) as the original contract(s), and that the term or approximate repayment period of the loan or account may be extended due to this request.

Details about the extension request:

- Interest will continue to accrue during the deferral period.
- The maximum single extension term is three months.
- A loan which is less than six months old is not eligible.
- All requests are subject to review and/or approval.
- Proof of income may be requested.
- A maximum of two extensions may be granted during the term of the loan and any one extension may not be deferred more than once during a twelve month period.

Borrower acknowledgement of details of extension request. Co-applicant acknowledgment of details of extension request.

Primary Member's Signature	Date
Co-Borrower's Signature	 Date

How to request the service:

Fill in the form, print to sign, then email to: loanservicing@premieronecu.org

Visit your nearest branch, view locations here.

Fax to Loan Servicing at 408-454-5421