



# BETHEL CREDIT UNION CO-OPERATIVE SOCIETY LIMITED

## REQUEST FOR WAIVER OF LOAN PRINCIPAL PAYMENT

DATE OF REQUEST

BORROWER'S FIRST NAME  BORROWER'S LAST NAME

CO-BORROWER'S FIRST NAME  CO-BORROWER'S LAST NAME

ACCOUNT NUMBER

REASON FOR REQUEST

CONTACT NUMBERS HOME: \_\_\_\_\_ WORK: \_\_\_\_\_ MOBILE: \_\_\_\_\_

EMAIL ADDRESS

In light of the effects of the COVID-19 Pandemic on my earnings. I/We hereby request a cessation on my/our loan principal payment for the period outlined below:

Month 1 \_\_\_\_\_ Month 2 \_\_\_\_\_ Month 3 \_\_\_\_\_ Other \_\_\_\_\_

Please specify from which month the cessation will commence. (E.g. March, April etc.)

### DECLARATION

I / We understand that upon the maturity of this request, I / We are to resume full loan payments. I/We understand that the loan schedule will be adjusted accordingly to account for any past due principal payments.

I / We declare that all information herein given is true, accurate, and complete to the best of my / our knowledge and was provided for the obtaining of a cessation of my / our principal loan payment(s).

.....  
Borrower Name (Block Letters)

.....  
Borrower Signature

.....  
Co-Borrower Name (Block Letters)

.....  
Co-Borrower Signature

***FOR OFFICAL USE ONLY***	CREDIT COMMITTEE
DATE: _____	APPROVED BY: _____ _____ _____ _____ _____
MEMBER BRANCH: _____	
WAIVER ALREADY GRANTED: _____	
LOAN INSTALLMENT: \$ _____	
MONTHLY <input type="checkbox"/> FORTNIGHTLY <input type="checkbox"/> WEEKLY <input type="checkbox"/>	
LOAN BAL: \$ _____ INTEREST DUE: \$ _____	
LOAN BAL: \$ _____ INTEREST DUE: \$ _____	
SHARES BAL: \$ _____	DATE: _____
OFFICER NAME: _____	
OFFICER SIGNATURE: _____	