



DEFERRAL OF LOAN INSTALLMENT FORM
(COVID 19)

NAME _____ ACCT# _____

ADDRESS _____

DP/PP/NID # _____

CONTACT #'S _____

LOAN INSTALLMENT \$ _____

NUMBER OF DEFERRALS REQUESTED (1 TO 3) _____

START DATE OF DEFERRALS _____

I acknowledge and understand the following:

- **That a deferral does not constitute a waiver of my installments and I am still obligated to pay the deferred installments at a later date**
- **That the term/duration of my loan will be extended by the number of deferrals requested**
- **That interest continues to accrue and payments will be applied to interest first**

SIGNATURE OF APPLICANT

DATE

Copy of ID attached