



Loan Modification Request Form – COVID-19

Member(s) Name: _____

Member Number(s)-Loan Number(s): _____

I am requesting a Loan Modification on the following loan(s) (check all that apply):

Auto Loan/Lease Unsecured/Personal Loan Mastercard

Overdraft Line of Credit Boat/RV/ Motorcycle Loan Radio Loan

Home Equity Line of Credit Home Equity Loan Mortgage

Share Secured Loan/CD Loan Other: _____

I am requesting the following Loan Modification:

"Skip – A – Pay"

- Number of requested monthly payments deferred: 1 2 3

Mortgage Forbearance

Explanation for Loan Modification Request: (Additional letter can be attached if needed)

Occupation of Borrower(s): _____

Member Signature: _____

Member Signature: _____

Please email completed form to Collections@islandfcu.com

For Credit Union Use Only:

Date Received: _____

Received By: _____

Employee Initials/ID# _____