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Covid-19 Loan Deferral Agreement Form

Borrower Name: _____

Co-Borrower Name: _____

Account #: _____ Description: _____

Account #: _____ Description: _____

Account#: _____ Description: _____

Number of months to be differed: 1 or 2 (please circle one)

Reason for deferral: _____

By signing below, I authorize Riverfork FCU to extend my final loan payment by one or two monthly payment(s). Interest will accrue during the month(s) my loan payment is skipped.

Borrower signature: _____ Date: _____

Co-borrower signature: _____ Date: _____

Credit Union Authorization: _____ Date: _____