



PANDEMIC RELIEF

Date:

The Credit Committee
U.W.I Credit Union Co-operative Society Limited
118 Eastern Main Road,
St. Augustine.

I, _____ hereby request a waiver of my loan instalment for
 1 month
 2 months
 3 months

because _____

_____.

Thank you in advance for consideration of my request.

Regards,

Print Name

A/C#

Signature

For Official Use Only,

Schedule of Balances (see attached statement of member)	
Share Balance	\$
Deposit Balance	\$
Other Securities Assigned	
Loan Balance	\$
Existing Duration (mths)	
Proposed Duration (mths)	
Instalment	
Interest Rate	
DSR	

This loan waiver request is submitted for your attention.

On _____ we approved/did not approve this waiver request.

1) _____

2) _____

3) _____

4) _____

5) _____