

Request for Financial Relief

Date: _____

Member Name: _____ Account #: _____

Phone #: _____ Email: _____

Employer: _____

Occupation: _____

Reason for relief request / How have you been impacted?

Specific relief request:

Service Charges

Loan/Mortgage Payment

Member Signature: _____

Member Signature: _____

Member Signature: _____

Staff Signature: _____ Staff Signature: _____

Disclaimer:

- Each request will be reviewed on an individual basis up to 6 months.
- Caisse populaire de Clare reserves the right to approve or refuse this request.
- This request must be approved by all parties who originally signed the loan (i.e. Guarantors/Co-Signers)
- The intent of this relief is to assist members experiencing financial distress due to COVID-19.
- Caisse populaire de Clare reserves the right to suspend any relief approved at any time.
- For Mortgages, the payment relief is limited to payment and interest. The member must continue to contribute to their tax account and maintain full insurance on the property.
- For those loans that are maturing (term) during the deferral period the renewal will be done at the end of the relief period.
- This request may be subject to other conditions.