



REQUEST FOR LOAN PAYMENT FORBEARANCE (DEFERRAL)

Date: _____

I am impacted by the COVID-19 Pandemic and requesting payment forbearance

Loan Information	
Loan Type	If home loan, please choose one:
Loan 1:	
Loan 2:	
Loan 3:	
Loan 4:	

(please submit another form if you have more than four(4) loans requesting forbearance)

Contact information			
Name(s):			
Address:			
City:		State:	
		Zipcode:	
Contact Phone:		Email Address:	
Additional Questions or Comments			

Press the **PRINT** button to print and mail this form to:

First Federal Savings Bank
 633 LaSalle Street
 Ottawa, IL 61350
 Attn: Loan Servicing
 (*or drop off at any of our 12 branch locations)

Press the **EMAIL** button to send the form via electronic mail.
 (Please do not include your account numbers or tax ID numbers in the comment section if you are submitting via email)

QUESTIONS? CONTACT US

First Federal Savings Bank
Phone: 1-800-345-2178
Email Address: servicing@ffsbweb.com
Website: www.ffsbweb.com or www.ffsbloans.com