

**NIZARI** PROGRESSIVE FEDERAL CREDIT UNION

11770 University Blvd
 Sugar Land, Texas 77478
 281-921-8500 • Fax: 281-921-8550
 www.nizaricu.org

CREDIT LIMIT INCREASE REQUEST

AGREEMENT DATE

ACCOUNT NUMBER

AGREEMENT NUMBER

BORROWER 1 (NAME AND ADDRESS)		BORROWER 2 (NAME AND ADDRESS)	
SOCIAL SECURITY NUMBER/INDIVIDUAL TAX IDENTIFICATION NUMBER		SOCIAL SECURITY NUMBER/INDIVIDUAL TAX IDENTIFICATION NUMBER	
EMPLOYMENT STATUS: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME		EMPLOYMENT STATUS: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME	
NAME AND ADDRESS OF EMPLOYER		NAME AND ADDRESS OF EMPLOYER	
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.		NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.	
EMPLOYMENT INCOME PER \$	OTHER INCOME PER \$	EMPLOYMENT INCOME PER \$	OTHER INCOME PER \$
TITLE/GRADE	OTHER INCOME SOURCE	TITLE/GRADE	OTHER INCOME SOURCE

CREDIT LIMIT INCREASE REQUEST

CURRENT LIMIT	REASON FOR INCREASE
I REQUEST THE CREDIT LIMIT FOR	TO BE INCREASED TO \$

ACKNOWLEDGMENT AND AUTHORIZATION

You promise that everything You have stated above is correct to the best of Your knowledge. If there are any important changes, You will notify Us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this request for an increased credit limit and for any other update, increase, renewal, extension, or collection of the credit received and for other accounts, products, or services We may offer You or for which You may qualify. If You request, the Credit Union will tell You the name and address of any credit bureau from which it received a credit report on You. It is a crime to willfully and deliberately provide incomplete or incorrect information in this request. You agree to repay all amounts You owe in accordance with Your Agreement.

Borrower Signature	Date	Borrower Signature	Date
X	(Seal)	X	(Seal)

FOR CREDIT UNION USE ONLY

DATE	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED (Adverse Action Notice Sent)	APPROVED LIMITS:	CREDIT CARD \$	LINE OF CREDIT \$	OTHER \$	DEBT RATIO/SCORE BEFORE AFTER
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LOAN OFFICER COMMENTS

CREDIT COMMITTEE OR LOAN OFFICER SIGNATURES

Signatures	Date	Signatures	Date
X		X	