

Firefighters Credit Union Credit Line Account Increase Request

The primary member and all additional co-borrowers must sign this credit limit increase request.

Credit Union Account Number: _____

Primary Member Name: _____

Additional Co-Borrower Names: _____

Requested Credit Limit: _____

I/we authorize the credit union to obtain a credit bureau report to evaluate this request. I/we understand that before this request is acted upon, the credit union may request additional information or documentation to verify my/our income, employment, or credit history. I/we acknowledge that we have received a copy of the Credit Line Account Agreement.

Primary Member Date

Co-Borrower Date

Co-Borrower Date

Co-Borrower Date