



Request to Lower Credit Limit

Visa Credit Card /Line of Credit

Name: _____

Member Number: _____

Credit Card Number: _____
(Ending in last six)

Loan Type: _____

Please perform the following maintenance on my Visa Credit Card/ Line of Credit (check all that apply):

Lower my visa credit Limit

Current Limit: _____ New Limit: _____

Lower my line of credit Limit:

Current Limit: _____ New Limit: _____

I authorize JSC Federal Credit Union to make the above listed changes to my account.

Primary or Joint Member's Signature

Date

Loan Officer Signature

Date