

Bank / Credit Card Issuer Name

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## Credit Card Limit Increase Request Letter

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### Date & Recipient

Date: \_\_\_\_\_

### Recipient Information:

\_\_\_\_\_  
*Credit Card Department*

\_\_\_\_\_  
*Bank / Issuer Name*

\_\_\_\_\_  
*Address Line 1*

\_\_\_\_\_  
*City, State / Province, Postal Code*

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### Personal Information

Full Name:\*

\_\_\_\_\_

Credit Card Account Number (last 4 digits):\*

\_\_\_\_\_

Phone Number:\*

\_\_\_\_\_

Email Address:\*

\_\_\_\_\_

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### Credit Limit Information

Current Credit Limit:\* \$ \_\_\_\_\_

Requested Credit Limit:\* \$ \_\_\_\_\_

Request Type:\*

Permanent increase     Temporary increase     Increase for specific purchase

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### Reason for Request

**Reason for Increase:\***

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**Employment & Income (Optional)**

**Employer Name:**

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**Annual Income:** \$ \_\_\_\_\_

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**Letter Body**

**Subject: Credit Limit Increase Request for Account Ending in \_\_\_\_\_**

Dear Credit Card Department,

I am writing to formally request a credit limit increase on my credit card account, ending in the last four digits \_\_\_\_\_. My current credit limit is \$\_\_\_\_\_, and I would like to request an increase to \$\_\_\_\_\_.

I have been a responsible cardholder and have a consistent history of on-time payments. My financial situation is stable, and I believe my credit profile supports this request. The primary reason for this request is as follows:

*[Briefly explain the reason for your credit limit increase request here, corresponding to the section above]*

I am confident in my ability to manage a higher credit limit responsibly. I would appreciate it if you would review my account and consider my request.

Thank you for your time and consideration. I look forward to your response.

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**Supporting Documents Checklist**

*Please check the boxes for any documents you are attaching to support your request.*

- Pay Stubs
- Tax Return
- Bank Statements
- Proof of Address

■ Other

If "Other," please specify: \_\_\_\_\_

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## Authorization & Consent

■ I authorize the credit card issuer to review my credit profile if required for this request.\*

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## Signature

Signature: \_\_\_\_\_

*(Sign here after printing)*

Printed Name:\*

\_\_\_\_\_

Date:\* \_\_\_\_\_

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## Follow-Up Recommendation

*You may wish to follow up with the credit card issuer by phone or secure message after 7–14 business days if you have not received a response to your request.*