

**AIR FORCE GOVERNMENT TRAVEL CHARGE CARD  
CREDIT LIMIT INCREASE WORKSHEET**

**Section 1: Cardholder Information**

Last, First Name:  Last 8 of the Account #:

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**Section 2: Credit Limit**

Restricted Accounts Temporarily Increase Maximum 180 days and Standard Accounts Temporarily Increase Maximum 365 days

Credit limit:  Cash limit:  Start Date:  End Date:

**Section 3: Justification for credit and cash limit increase**

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**Section 4: Requester**

**Approving Official** \*Commander / Director or Supervisor

Name/Grade/Rank:

Name/Grade/Rank:

Position:

Position:

Signature:

Signature:

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**Section 5: HL4-7 APC (For requests up to \$15k)**

APC Name:

Approved  Disapproved

Signature:

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**Section 6: HL3 APC (For requests up to \$25k)**

**Section 7: HL2 APC (For requests up > \$25k)**

APC Name:

APC Name:

Approved  Disapproved

Approved  Disapproved

Signature:

Signature:

Privacy Act Statement

AUTHORITY: (Provide the USC or Public Law; i.e., 37 USC 043, Public LW 96-343,EQ9397). PURPOSE: To request a credit increase on the traveler's Government Travel Charge Card (GTCC). ROUTINE USES: This information will be used to assist Agency Program Coordinator, Air Force Banking Division, and the Defense Travel Management Office in updating cardholder's account information stored in the travel card vendor's Electronic Access System (EAS). DISCLOSURE: Voluntary. However, failure to provide all information including Social Security Number (SSN) may result in delay of response or disapproval of the request.

07/15/20

# CREDIT LIMIT INCREASE WORKSHEET INSTRUCTIONS

Below are instructions for completing the credit/cash limit increase request form. Use only one account per worksheet, and as always, careful scrutiny should be used on all increases.

- Card holder and/or requester will complete Sections 1, 2, and 3
- Requester and Commander, Director or supervisor will complete Section 4
- HL4 -7 will complete Section 5
- HL3 will complete Section 6 for requests above \$15,000
- HL2 will complete Section 7 for requests above \$25,000

**Section 1:**

- All fields are mandatory

**Section 2:**

- Select type of card: Standard or Restricted
- Standard Account: Up to one year Restricted Account: Up to six months
- Enter desired limits for credit and cash, if requesting
- Enter start date and end date

**Section 3:**

Provide brief justification on why the credit limit is needed. If Schedule Partial Payment's (SPP) are included on the order, APCs should take into consideration that an increase might not be needed because payments will be sent to the bank.

**Section 4:**

Before any credit limit increase is processed, the requesting authority must validate the request and submit it to the approving official for approval prior to sending to the unit/organizational APC.

Both requesting and approving authority should be a government employee within member's chain of command and the approver must also be either Commander, Director or Supervisor.

**Sections 5-7:**

APC will either approve or disapprove, and forward approval to HL3 for requests above \$10,000 and from HL3 to HL2 for requests above \$25,000.

APCs who disapprove a request will provide brief explanation in an email to the requesting authority.

ACCOUNT TYPE	LIMIT TYPE	DEFAULT LIMIT	APC HL 4-7	APC HL 3	CPM HL2	DTMO HL1
STANDARD ACCOUNTS	CREDIT	\$7,500	Up to \$15,000	Up to \$25,000	Up to \$50,000	No Maximum
	CASH	\$250	Up to \$5,000	Up to \$10,000	Up to \$50,000	No Maximum
	RETAIL	\$250	Up to \$500	Up to \$1,000	Up to \$2,000	No Maximum
RESTRICTED ACCOUNTS	CREDIT	\$4,000	Up to \$15,000	Up to \$25,000	Up to \$50,000	No Maximum
	CASH	\$250	Up to \$5,000	Up to \$10,000	Up to \$50,000	No Maximum
	RETAIL	\$100	Up to \$500	Up to \$1,000	Up to \$2,000	No Maximum