

Virtual Card Transaction Limit Increase Request



Dear Cardholder,

In order to fulfill your request to increase your ***Virtual Card Transaction Limit***, please fill in all the following information: (**Note: Increases will only be in multiples of 5. Ex. 10 to 15 to 20, etc...**)

Cardholder Name		Epassport User ID	
Virtual Card #		Email Address	
Daily Transaction Limit Desired #			

In addition we will need a copy of:

1. A government issued photo ID
2. Front/Back of each load card on account
3. Last statement of load card on account

Please fax all documents, along with the signed and dated request form to 1-310-943-2410.
Alternatively, you can email the documents as an attachment to: cs@epassporte.com.
Scanning/emailing works best.

By signing this document you acknowledge that you are the primary account holder and owner of the ePassporte account mentioned above.

Signature: _____

Date: _____