



Velocity Increase Request Form

In order to update the velocities on your account, please have an authorized signer of the business complete and sign this form. Please also submit **two months of current bank statements** for review.

Merchant Information

Merchant

Name/DBA: _____

Merchant ID#: _____

Printed Name of
Authorized Signer: _____

Email: _____

Phone Number: _____

Velocity Update Information

Requested Maximum Per Transaction Amount: Debit \$ _____

Requested Maximum Daily Volume Amount: Debit \$ _____

Requested Maximum Monthly Volume Amount: Debit \$ _____

Please provide a detailed explanation of the reason for requesting limit increase:

Authorized Signer's Signature

Date

Please fax completed form and statements to 404-665-3465 or support@vericheck.net