

**S.C. STATE CREDIT UNION**  
**Servicemembers Civil Relief Act Notification Form**

Date \_\_\_\_\_

Member Number \_\_\_\_\_

TO: S.C. State Credit Union  
Attn: Loan Adjustment Services  
Post Office Box 726  
Columbia, SC 29202

Fax: (803) 454-8042  
Email: info@scscu.com

This is to inform you that I have been mobilized and I am now on active duty in the United States Armed Forces. Under the Federal Law, the Servicemembers Civil Relief Act, I request that the interest rate on my loan(s) and/or Visa account be adjusted to 6%. This request results from my being called to active duty status with the military, which has materially and adversely affected my ability to pay my debt(s).

Further, I authorize (print name) \_\_\_\_\_ as my contact person(s), to act on my behalf in regard to my loan(s)/ credit card(s) with the S.C. State Credit Union and to receive information or answer questions concerning my loan(s) and/or credit card(s). I hold harmless the S.C. State Credit Union from any action in regard to the release of any information to the same.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Full Name (print)

DOB \_\_\_\_\_

Last 4 Digits of Social Security Number \_\_\_\_\_

Home Phone No. \_\_\_\_\_

Cell Phone No. \_\_\_\_\_

Email Address \_\_\_\_\_

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**Contact Person(s) Information:**

\_\_\_\_\_  
Full Name (print)

Address \_\_\_\_\_

Home Phone No. \_\_\_\_\_

Cell Phone No. \_\_\_\_\_

Email Address \_\_\_\_\_

***Attach a copy of active duty orders.***

To be completed by credit union employee.

Received by: \_\_\_\_\_

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