

ACCOUNT CLOSING LETTER



Fill out form and mail to the account maintenance department of each financial institution you are closing an account with.

ATTENTION: Account Maintenance

This letter is to inform you I am closing my accounts at your bank. Please close the following account(s) listed below and send a check for the remaining balance(s) to my address.

If you have any questions regarding this request, please contact me in writing or at the phone number listed below. Thank you for your prompt assistance in this matter.

Sincerely,

AUTHORIZED SIGNATURE

(Original signature required to authorize change)

DATE

ACCOUNT INFORMATION

CHECKING ACCOUNT NUMBER(S)

OTHER ACCOUNT NUMBERS TO CLOSE (If applicable)

MY NAME

MY ADDRESS

CITY

STATE

ZIP

SPECIAL INSTRUCTIONS OR COMMENTS

