

REQUEST TO CLOSE DEPOSIT ACCOUNT



To

Current Financial Institution

Address

City

State

Zip Code

From

Account Owner

Owner/Principal (if a business)

Address

City

State

Zip Code

Phone Number

RE: Request to close deposit account

Please be advised that I've recently changed banks and will need to close my current account with your bank. My account information is as follows:

Account Number

Primary Account Holder

Social Security Number

Please forward all remaining funds in the account to me by check at the following address:

Use Address Above

Complete below if forwarding address is different than address above.

Address

City

State

Zip Code

Should you have any questions regarding this request, please feel free to contact me using the above-referenced contact information.

Authorized Signature(s)

Date

