



ACCOUNT CLOSING REQUEST

\_\_\_\_\_  
Date

\_\_\_\_\_  
Old Bank Name

\_\_\_\_\_  
Address

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
City State Zip Code

To Whom It May Concern:

Please close the following account(s) and send a check for the remaining balance to the address listed below:

\_\_\_\_\_  
Checking Account # at \_\_\_\_\_ Closing Balance Amount

\_\_\_\_\_  
Savings Account # at \_\_\_\_\_ Closing Balance Amount

If you have any questions regarding this request, please call me at the number at the number listed below. Thank you for your assistance with this matter.

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
City State Zip code

\_\_\_\_\_  
Phone Day/Evening (circle One)