

Existing Account Closing Form

To:

Bank's Name

Address

City State Zip

From:

Customer Name

Customer Address

City State Zip

To Whom it May Concern:

Please close my account described below, effective today's date, as indicated and send a check for the remaining balance to the address above.

Name(s) on Account

Account Number

\$ Balance

Name(s) on Account

Type of Account

If you have any questions, please contact me at the following number:

Phone Number Day/Evening (circle one)

Thank you for your prompt attention to this matter.

Sincerely,

Customer Signature

Joint Account Holder Signature

Date

Date