

## Existing Account Closing Form

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*Complete this form and return it to your old bank.*

To Whom It May Concern:

Please close my account described below and mail me a check for the remaining balance in the account to the address indicated below.

\_\_\_\_\_  
Name(s) On Account

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Type of Account

Prepare a cashier's check for the balance of my account payable to:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

State

\_\_\_\_\_  
Zip

Thank you for your prompt attention to this matter.

Sincerely,

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Account Holder Signature

\_\_\_\_\_  
Date