

## ACCOUNT CLOSURE FORM

Customer Name:.....

Customer Address:.....

Date:.....

Dear Sir / Madam,

I / We wish to close the following account(s)

Account No: .....

Account Name: .....

Signature 1)..... 2).....

3)..... 4).....

Reason for Account Closure :.....

.....

.....

.....

### For official use only

### Checklist

Obtain ATM card from Customer

Obtain cheque Book from customer

Destroy unused cheque leaves in the system

Recover any uncollected charges

Sanction / Drawing limits / Guarantees removed

Delete Standing instruction in the system

Branch:	Prepared by:	Authorized by:
---------	--------------	----------------

Call back time/date:.....

Name:.....