


EASY Switch
Request to Close Account

Today's Date

Company Name

Street Address

City State Zip

To Whom It May Concern:

I hereby request that you close the following bank account I maintain with you.

The bank account number is: _____

The name on the account is: _____

Secondary name on the account is: _____

Any funds that need to be disbursed to bring my account to zero should be mailed by check to:

Your Name

Street Address

City State Zip

Telephone Number

Thank you for your prompt attention to this request.

Sincerely,

Primary account holder signature: _____ Date: _____

Secondary account holder signature: _____ Date: _____