



REQUEST FOR ACCOUNT CLOSURE

Account Name _____ Date _____

Account Number

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I/We shall be glad if you kindly arrange to close my/our subject account with you upon receipt of this letter.

Reason for closure

- | | |
|--|--|
| <input type="checkbox"/> Customer changes employer and salary not routed through CBA
<input type="checkbox"/> Loss of Income
<input type="checkbox"/> Customer relocating to an area with no CBA branch
<input type="checkbox"/> CBA cannot offer customer a loan
<input type="checkbox"/> Customer unhappy with customer service
<input type="checkbox"/> High bank charges and commissions
<input type="checkbox"/> Others <i>(please specify)</i> _____ | <input type="checkbox"/> Consolidating all accounts under customer's main bank
<input type="checkbox"/> Customer leaving the country
<input type="checkbox"/> Loan with CBA repaid - account no longer required
<input type="checkbox"/> Other competitor banks features are superior to CBA
<input type="checkbox"/> Customer unhappy with relationship manager |
|--|--|

State your experience while you were a customer of CBA _____

After deducting your charges, please pay the balance by Cash Banker's Cheque

Transfer to my Account details as follows

Beneficiary Account Name	
Beneficiary Account No.	
Beneficiary Bank Branch No.	
Swift Code <i>(where applicable)</i>	

I/We enclose _____ unused cheque forms bearing serial number _____ to _____ and my/our debit card(s) number(s)

My/Our Forwarding address will be _____

Name _____ Name _____
 Signature _____ Signature _____
 Tel(Office) _____ Tel(Office) _____
 Mobile No. _____ Mobile No. _____
 Account type _____

FOR BANK USE ONLY

Input by _____
 Checked by _____
 Closure confirmed by ARM _____

Check if customer(s) has/have any of the under mentioned products

BALANCE

Current _____ Savings _____
 Term Deposits _____ Loan _____
 Overdraft _____ Credit Cards _____
 Letter of Credit _____ Collection items _____
 Safe Custody Articles _____ Collateral/Security _____
 Bonds/Guarantees _____

Confirm:

Yes No

Cheque book returned and shredded	<input type="checkbox"/>	<input type="checkbox"/>
Debit Card returned and shredded	<input type="checkbox"/>	<input type="checkbox"/>
Balance in account before closure	<input type="checkbox"/>	<input type="checkbox"/>
Standing Orders cancelled	<input type="checkbox"/>	<input type="checkbox"/>
Final charges paid	<input type="checkbox"/>	<input type="checkbox"/>
Approval for final charges waiver	<input type="checkbox"/>	<input type="checkbox"/>
Final balance due to Customer/Bank	<input type="checkbox"/>	<input type="checkbox"/>
Final balance paid by Cash/Banker's Cheque	<input type="checkbox"/>	<input type="checkbox"/>
Draft/Transfer to account	<input type="checkbox"/>	<input type="checkbox"/>
Final statement printed and mailed	<input type="checkbox"/>	<input type="checkbox"/>
Customer file marked closed	<input type="checkbox"/>	<input type="checkbox"/>

Operations Assistant _____

Supervisor _____