## **Account Closure Form**



The Head of Branch	_ Branch										L	DD	) M	I M	Υ	Y	YY	_
CIF Number																		
Account Number																		
Name (English; Block Letters)																		
I/We request to close my/our above mentioned account																		
Account Closure Reason:																		
Debit Card: Surrendered Self Destructed																		
Cheque Book:	neque Book: Surrendered Self Destructed																	
Mode of Payment of the	e remaining	balance																
Pay order	Transfe	er to A/0	C Number															
Cancellation of Standing Instruction: Cancellation of Locker																		
Signature of the Account Holder								Signature of 2 <sup>nd</sup> Account Holder (In case of Joint Account)										
For Branch Useanch Use																		
Debit Card De	stroyed																	
Cheque Book Destroyed																		
Necessary balance available at customer account for deducting all closing related charges																		
Checked by (Concerned Branch Officer)										Ā	Appro	ved b	y (ON	I/HOE	3)			
For Operations Use													<u>.                                    </u>	,				
System Given Amoun	nt		_					Exe	ecutio	on Da				/20_				
AMC Applied TAX Deducted												Settle	emer	IL A/				
ED Deducted							For Account Closure A/C Number:											
Net Paid Amount																		
Applied Interest Rate		Cheque Book Closed (If)																

Approved by

Verified By

Verified By