

# Account Closing Notification

To: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Full Name (Primary Account Holder): \_\_\_\_\_

Social Security Number / Tax ID: \_\_\_\_\_

Full Name (Secondary Account Holder): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

**I am submitting this letter as a written notification of my intent to close my account(s) with your company. Please initiate this request as soon as possible.**

## ACTIVE ACCOUNT(s)

Account #: \_\_\_\_\_ Account Type: \_\_\_\_\_  
Choose One:  Send Payment Now, or  Defer Payment Until close of Interest Period

Account #: \_\_\_\_\_ Account Type: \_\_\_\_\_  
Choose One:  Send Payment Now, or  Defer Payment Until close of Interest Period

Account #: \_\_\_\_\_ Account Type: \_\_\_\_\_  
Choose One:  Send Payment Now, or  Defer Payment Until close of Interest Period

Account #: \_\_\_\_\_ Account Type: \_\_\_\_\_  
Choose One:  Send Payment Now, or  Defer Payment Until close of Interest Period

PLEASE SEND ANY FUNDS REMAINING IN THESE ACCOUNTS IN CARE OF:

Financial Institution: Legacy Bank

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\_\_\_\_\_  
Signature (Primary Account Holder)

\_\_\_\_\_  
Signature (Secondary Account Holder)

\_\_\_\_\_  
Date