

Account Closure Form



Please close the following account(s)

1. Account details

| | | |
|--------------------------|--------------------------------------|--------------------------------|
| Account name | <input type="text"/> | |
| Account holding branch | <input type="text"/> | |
| Account(s) to be closed: | Account number <input type="text"/> | Sort code <input type="text"/> |
| | Type of account <input type="text"/> | |
| | Account number <input type="text"/> | Sort code <input type="text"/> |
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| | Account number <input type="text"/> | Sort code <input type="text"/> |
| | Type of account <input type="text"/> | |

Credit/currency charge card number(s)

Care: If you are unable to list all of your accounts then please provide an additional copy of this form.

2. Settlement instructions – standard payment charges may be applied for certain payment types

2.1 Transfer to another Bank/Building Society/International Payment

| | | |
|----------------------------|----------------------|--------------------------------|
| Beneficiary name | <input type="text"/> | |
| Account number /IBAN | <input type="text"/> | |
| SWIFT/BIC | <input type="text"/> | Sort code <input type="text"/> |
| Additional Routing Details | <input type="text"/> | |
| Currency to be sent* | <input type="text"/> | |
| Bank/Building Society name | <input type="text"/> | |
| Bank address | <input type="text"/> | |
| | <input type="text"/> | |
| | <input type="text"/> | |
| | <input type="text"/> | |

2.2 **OR** Donate to a charity of the Bank's choice: Local charity of the Bank's choice

* IMPORTANT: The Bank will automatically send all payments to the beneficiary in the local currency of the destination country, in which the Bank ordinarily deals as published from time to time, **UNLESS expressly instructed by you in the space provided.**

3. Payment charges

I/We will pay all charges from the amount being sent

Beneficiary to pay all charges

Please refer to our website for further details relating to payment charges.

4. Contact details

We may need to contact you to verify your instruction, therefore please provide contact details below.

Telephone number

Email address

5. Confirmation – To be signed in accordance with the Bank Account Mandate/Signing Instructions

Customer signature(s)

Date (DD/MM/YYYY) _____

Date (DD/MM/YYYY) _____

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