Account Closing Letter

Use this form to mail to your current bank to close your account after all items are moved to your New Market Bank account.

Old bank						
Address						
			W0.0.4			
City	State	2	ZIP Code			
To whom it man Please close the interest to my no	account refere		d send the remai	ning balance	and any unpai	d
Date	_					
Customer Name			Date:			
Address	-					_
City, State, Zip						
Phone						
Pay	to the order:				\$ BOA	
		Custo	mer New Acct. #			
		Bala	nce of Account			
		Signature:				
C	o-signature (if					_
	o signature (ii					_
Rou	ting & Transit			Account No	umber	
Remit funds to New bank	: New Market E	3ank				
Address						
City	State		ZIP Code			
ATTN:						
	Customer Service F	Representative				