## **REQUEST FOR TERMINATION OF BANK ACCOUNT**

	DA						TE		
	JFG Bank, Ltd. angon Branch								
RE:	ACCOUNT NO.	:							
	ACCOUNT NAME	:							
	ADDRESS	:							
Dear Si	irs,	_							
	nis date, I/we wish to o you that no balance re			ed account in	your bank, I/	we have ex	amined the ac	count and	
Reasor	n(s) for closing accour	nt :							
The ins	truction for the dispos	al of the bal	ance in the acco	ount as follow:					
	Withdraw in cash by	/ myself/ours	selves.						
	Withdraw and remit/transfer in accordance with the application attached.								
I/We ur	nderstand that :								
1.	Funds received for account is closed wi embarrassment aris	ill be returne	ed. I/We will not h					ter the	
2.	In the event of any discrepancies in payment, I/we shall indemnify the Bank for any overpayment.								
3.	Returned herewith t	he unused c	cheques for your	cancellation (	from	t	0	)	
СОМ	IPANY CHOP AND AL	JTHORISED	) SIGNATURE	_					
			(For E	Bank use only)					
				DGM	Manager	Officer	Signature	Unused	
							Verified	Cheques Collected	
					-Banking Serv		Y/N		
					Credit Facilitie Unsetteled Trai		Y / N Y / N		
				/ tily t	oottoicu ila		. / 14		