

[Your Name]
[Your Address]
[City, State, Zip Code]
[Your Phone Number]
[Your Email Address]

[Date]

[Bank Name]
[Fraud Department or Branch Address]
[City, State, Zip Code]

RE: Notice of Identity Theft and Request to Close Certificate of Deposit Account
Account Number: [Insert Full CD Account Number]

Dear [Bank Name] Fraud Department,

I am writing to formally request the immediate closure of my Certificate of Deposit (CD) account referenced above. I am a victim of identity theft and this account has been compromised.

I have attached a copy of my Identity Theft Report (Police Report/FTC Affidavit) as evidence of this crime. Due to the fraudulent activity, I request that you:

- Close the account effective immediately.
- Waive any early withdrawal penalties or administrative fees associated with closing this account due to the circumstances of fraud.
- Transfer the full balance, including all accrued interest, to a new secure account or issue a certified check to my verified home address.
- Provide written confirmation that the account has been closed and that I am not held liable for any fraudulent transactions or deficits.

Please notify me immediately if any additional documentation is required to finalize this request. I look forward to receiving confirmation of the closure within [Number] business days.

Thank you for your prompt assistance in securing my assets.

Sincerely,

[Your Signature]

[Your Printed Name]

Enclosures:

- Copy of Identity Theft Report
- Copy of Government-issued Photo ID