

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

[Date]

[Financial Institution Name]
[Department Name, e.g., Retirement Services]
[Institution Address]
[City, State, Zip Code]

Subject: Authorization to Close IRA Account and Initiate Direct Rollover

Dear Sir/Madam,

Please accept this letter as my formal authorization to close my Individual Retirement Account (IRA) held with your institution and to perform a direct rollover of the entire balance.

Account Information to be Closed:

Account Holder Name: [Your Full Name]
Account Number: [Your Current IRA Account Number]
Type of Account: [e.g., Traditional IRA / Roth IRA]

Rollover Instructions:

Please liquidate all assets in the aforementioned account and issue a check for the full remaining balance. The check should be made payable to the successor custodian for my benefit as a direct rollover to avoid tax withholding.

Successor Custodian Information:

New Custodian Name: [Name of New Financial Institution]
For the Benefit Of (FBO): [Your Name]
New Account Number: [Your New Account Number]
Mailing Address for Check: [New Custodian's Mailing Address]

Please deduct any applicable closing or administrative fees directly from the account balance prior to the distribution. Once the funds have been transferred, please provide me with a final closing statement for my records.

If you require additional documentation or have questions regarding this request, please contact me immediately at [Your Phone Number].

Sincerely,

[Your Signature]

[Your Printed Name]