

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

[Date]

[Name of Financial Institution/Company]
[Department Name, e.g., Estate Department]
[Company Address]
[City, State, Zip Code]

RE: Deceased Account Holder Removal Request

To Whom It May Concern,

I am writing to formally notify you of the passing of [Name of Deceased], who passed away on [Date of Death]. I am requesting the removal of their name from the following account(s):

- Account Type: [e.g., Checking, Savings, Credit Card]
- Account Number: [Account Number]

I have attached a certified copy of the death certificate for your records. [Include the following sentence if applicable: I am the surviving joint account holder and wish to maintain the account in my name only.]

Please update your records accordingly and provide written confirmation once this change has been processed. If there are additional forms or steps required to finalize this request, please let me know as soon as possible.

Thank you for your assistance during this time.

Sincerely,

[Your Signature]

[Your Printed Name]
[Your Relationship to Deceased/Account]

Enclosure: Certified Copy of Death Certificate