

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

[Date]

[Name of Financial Institution]
[Department Name, if applicable]
[Address]
[City, State, Zip Code]

RE: Dispute of Account Closure - Account Number: [Your Account Number]

To Whom It May Concern,

I am writing to formally dispute the recent closure of my [Type of Account, e.g., Checking/Savings] account, which occurred on [Date of Closure]. I received notification of this closure via [Letter/Email/Phone] on [Date].

I believe this account was closed in error because [State Reason: e.g., there were no policy violations, the account was active, or specific transaction issues were misunderstood].

I am requesting the following actions:

- A detailed written explanation of the specific reason(s) for the account closure.
- A formal review and reconsideration of the decision to close the account.
- The immediate reinstatement of the account and access to my funds.
- Confirmation that this closure will not be reported negatively to ChexSystems or other consumer reporting agencies.

Attached are copies of [List documents: e.g., recent statements, proof of identification, or transaction receipts] that support my request for reinstatement.

Please provide a response regarding this matter within [Number, e.g., 10] business days. I look forward to your prompt resolution.

Sincerely,

[Your Signature]

[Your Printed Name]