

[Your Name/Company Name]

[Your Address]

[City, State, Zip Code]

[Phone Number]

[Date]

[Bank Name]

[Bank Address]

[City, State, Zip Code]

**RE: Request for Closure of Escrow Account #[Account Number]**

To the Account Management Department,

Please accept this letter as a formal request to close the escrow account referenced above, effective immediately. As of the date of this letter, the account maintains a zero balance.

I confirm that all transactions associated with this escrow agreement have been completed and there are no outstanding obligations or pending disbursements. Please provide a final statement or a written confirmation of closure for my records.

If there are any administrative forms required to finalize this request, please contact me at [Your Phone Number] or [Your Email Address].

Thank you for your assistance with this matter.

Sincerely,

[Signature]

[Your Printed Name]

[Your Title, if applicable]