

[Your Name]
[Your Address]
[Your Phone Number]
[Date]

[Financial Institution Name]
[Account Department]
[Institution Address]

Subject: Voluntary Surrender of Account and Notice of Closure

To Whom It May Concern,

I am writing to formally request the voluntary surrender and immediate closure of my account held with [Financial Institution Name].

Account Details:

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

Please consider this letter as my official authorization to terminate the account relationship. I have stopped all automated payments and direct deposits associated with this account. [Optional: I have enclosed/destroyed all credit cards and checks associated with this account.]

Please send a final statement and a written confirmation that the account has been closed with a zero balance to my address listed above. If there is a remaining balance, please issue a check for the full amount payable to me.

If you require any further information to process this request, please contact me at your earliest convenience.

Sincerely,

[Signature]

[Your Printed Name]