



**Make the switch to Chippewa Valley Bank
CLOSE EXISTING ACCOUNT FORM**

To Whom It May Concern:

Please close my account described below:

Name (s) on Account

Social Security/Tax ID Number

Account Number

Account Type

Check Only One:

☐ **No Disbursement of funds is necessary**

- ☐ The account balance is zero
- ☐ I have deposited a check for the balance in my new account

☐ **Disbursement of funds is necessary.** Prepare a bank check for the balance of the account payable to:

- ☐ Names on the account, and mail to:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

- ☐ **Chippewa Valley Bank** for the benefit of _____
(Account Holder's Name)

To be deposited in Account Number : _____

Please prepare a cashier's check for the balance of my account and mail with this form to:

Chippewa Valley Bank

Thank you for your prompt attention to this matter.

Sincerely,

Customer Signature

Date

Joint Account Holder Signature

Date

* One form should be used for each request. Please make additional copies as needed.

