

Account Closure Notice

Complete this form and mail to your previous financial institution after your new Colonial American Bank account is open and all of your direct deposit, automatic payments, etc. with your past account have been settled.

Information About Your Previous Financial Institution

.....
Name of Institution

.....
Account Number

.....
Institution Street Address

.....
City

.....
State

.....
Zip Code

Your Information

.....
Primary Account Owner Name

.....
Primary Account Owner Social Security Number

.....
Joint Owner Name (if applicable)

.....
Joint Owner Social Security Number (if applicable)

.....
Telephone Number

Please Mail Balance To:

Colonial American Bank
300 Welsh Road Bldg 4
Horsham, PA 19044

I authorize closing my account and forwarding the balance to my new Colonial American Bank account. All of my checks have cleared and all direct deposit and automatic payments have been stopped. If joint account, I hereby certify that co-owner is living.

.....
Primary Account Owner Signature

.....
Date

.....
Joint Owner Signature (if applicable)

.....
Date