



Account Closure Request Form

Switching is easy. After you confirm that all your direct deposits and automatic payments have been switched to your new WaFd Bank account, complete this form to close your old account.* Provide this form to your old account institution. Some institutions might need to speak with you before fulfilling your request.

Dear Form Recipient:

Please close my account referenced below. Send a check for the remaining balance to the mailing address provided below.

My account number is: _____

Please contact me if you have any questions regarding this request.

Thank you,

Client Signature

Date

Printed Name

Client Signature – Joint Signer (Optional)

Date

Printed Name

Mailing Address:

Name: _____

Address: _____

Primary Phone Number: _____

Secondary Phone Number: _____

Thank you for banking with WaFd Bank.

* Some third parties might require additional or alternative paperwork to complete your request.