

# Adverse Action Notification

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

Dear [Account Holder's Name],

We regret to inform you that your financial account with [Financial Institution Name], account number [Account Number], has been closed as of [Closure Date]. This decision was made due to [reason for account closure, e.g., lack of activity, non-compliance with account terms, etc.].

This action was taken in accordance with [specific policy or guideline], and we have made efforts to contact you regarding this matter prior to the closure.

Your right to the notification of adverse action has not gone unnoticed. You have the right to request the specific reasons for this action, and you may contact us at [Contact Information] to discuss this further.

If you believe this decision was made in error, please provide us with any documentation that may support your case, and we will review it accordingly.

We appreciate your understanding in this matter. Should you have further questions or need assistance, please do not hesitate to reach out.

Thank you,

[Your Name]

[Your Position]

[Financial Institution Name]