

Credit Card Closure Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

Customer Service Department

[Credit Card Company Name]

[Company Address]

[City, State, Zip Code]

Dear Customer Service Team,

I am writing to formally request the closure of my credit card account with the number ending in [last four digits]. Due to recent changes in my financial situation, I would like to close this account to avoid any potential fees or charges.

Please confirm the closure of my account and ensure that no further transactions or fees are applied. If there are any outstanding balances, I will take care to settle them promptly.

Thank you for your attention to this matter. I look forward to your confirmation of the account closure.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]