

Joint Account Closure Request

Date: [Insert Date]

To,
[Bank Name]
[Branch Address]
[City, State, Zip Code]

Subject: Request for Closure of Joint Account

Dear [Bank Manager's Name],

We, [Your Name] and [Co-Account Holder's Name], hereby request the closure of our joint account with the account number [Account Number].

We have taken this decision mutually and would appreciate your assistance in the closure process. Please find attached any necessary identification and account closure forms as required.

Kindly confirm the closure of the account in writing and transfer any remaining balance to [specify destination account details or indicate 'cash withdrawal'].

Thank you for your prompt attention to this matter.

Sincerely,
[Your Name]
[Your Signature (if sending a hard copy)]
[Your Contact Information]

[Co-Account Holder's Name]
[Co-Account Holder's Signature (if sending a hard copy)]
[Co-Account Holder's Contact Information]