



ACCOUNT CLOSURE FORM

Date _____

Address of Account Holder _____

BPM Account No: _____

TRN: _____

Dear Sirs:

This letter serves as a formal request to close the account stated above in the name(s) of _____ . Please find all the details for the recipient bank account below:

LODGEMENT INFORMATION (If Applicable)	
Name of Bank:	Account Name:
Bank Branch:	Account Address:
Bank Address:
Wires Only	Account Number:
Bank SWIFT#	Account Type: <input type="checkbox"/> Savings <input type="checkbox"/> Chequing
Bank Routing #:	<input type="checkbox"/> Crossed cheque <input type="checkbox"/> Online Transfer
IBAN #:	
Third-Party (if applicable):	Recipient Name:
	Recipient Address:

Thank you for your assistance in this regard. Please see the contact details below if you have any queries:

CONTACT DETAILS			
Telephone:	(W)	(H)	(C)
Email Address:			

Special Instructions:

Name: _____

Signature: _____

For Internal Use	Cheque No:	Wire Transfer Ref #:
	Client's File Checked against info provided by:	Date:

Kindly note that all account closures are subject to a fee of **JM\$1,750.00** for JMD accounts and **US\$22.50** for USD accounts. To facilitate wire transfers, there is a fee of **JM\$425.00** for JMD accounts and **US\$47.50** for USD accounts. We require **3 to 5 working days** to process all transactions. **NB:** Fees are subject to change without prior notice. All clients' **JMD cheques \$250,000.00** and over; and all clients' **USD cheques US\$1,500.00** and over will be crossed.