

City & State: ___

ACCOUNT CLOSING FORM

To Whom It May Concern: Please close the following bank account (s): O DDA Lifestyle O Term Deposit (CD) Name on Account Account Number O DDA Lifestyle Term Deposit (CD) Name on Account Account Number All remaining balances (less service charges) should be sent to me via: **USD Check:** Beneficiary Information* Payable to: Delivery Option*: Please check and complete as applicable: Q Pickup in person Q Local Courier Service (Tropic Air) Q International Courier Service (FedEx) Deliver to: Address: Or **Wire Transfer:** Beneficiary Bank Information * SWIFT Code / ABA / Routing: Name: Address: City & State: Country: ___ Beneficiary Customer Information* Account #: Name: Address: City & State: _____ Country:_ Intermediary Bank Information (if Applicable) SWIFT Code / ABA / Routing: Name: Address:

Country:___



ACCOUNT CLOSING FORM

If you have any questions about this	request, please contact me at:	
Thank you.		
Sincerely,		
Account Authorized Signature *	-	
Authorized Indemnity Password*	-	
Date *		

Note:

- 1. All sections indicated by asterisk (*) are required for wire transfer request to be processed.
- 2. All wire transfers requests received by Caye International Bank, Ltd. before 3pm EST will be processed the same day. If received after 3 pm EST it will be processed the following business day.
- 3. Kindly allow 48 to 72 hours for USD Cashier's check to be ready for pick up or shipped (Courier packages are generally received within 3 5 business days of shipped date.
- 4. Kindly allow 48 to 72 hours for wire transfers to be credited to beneficiary account.
- 5. Requests that are received via email will not be processed if indemnity is not signed by account holder and Bank representative does not received phone call from account holder confirming request was sent.