Close account



Personal details		
Customer name	Custon	omer number
Address		Postcode
Account closure		
I request that all accounts open	ed in my name be closed and the cr	credit balance be paid as follows:
Transferred to Bank Australi	a account number	
OR provide bank transfer de	etails	
BSB	Account number	Title
OR	p products and services linked to my count/s be closed and the credit bala	ay accounts will cease upon closure of this account. lance paid as follows:
Transferred to Bank Australi OR provide bank transfer de		
BSB	Account number	Title
I acknowledge that all access to	products and services linked to my	ay accounts will cease upon closure of this account.
	s closing payroll credits, social secur nents etc. must be cancelled by noti s).	-
	: cards Return cards, sign a letter sta Bank Australia account number	tating the Yes No
Credit card or Overdraft facil prior to the closure of the acc	ity All outstanding debt must be clea count(s)	eared Yes No

 Direct Debit Authority or re-occuring Visa payments You should contact the relevant organisation(s) to arrange for the cancellation of the Direct Yes Debit Authority or arrange to debit another account.

No

Declaration

I/We acknowledge that my/our accounts will be closed only on completion of the above important items.

I/We also acknowledge that I/we remain responsible for all transactions I/we have authorised to be debited against this account even though the transaction may not be debited as at the date my/our account is closed.

Please indicate your reason for closing your account/s by ticking a box below, and/or providing more information in the space provided below.

Unsatisfactory deposit interest rates	Unsatisfactory loan interest rates
Dissatisfied with staff	Dissatisfied with service
Dissatisfied with access options	Received better offer elsewhere
Fees and charges	Loan declined

Additional comments

If joint account is being closed, must be signed by all account owners.

Signature

Signature

Please be aware that we require a physical signature on this form, once completed print off and sign before sending.

Date

/	/	

Date



Bank Australia use only

Close account worksheet

Closure tasks	Date actioned	Not applicable	Operator number and initials
Signature verified			
Card returned			
Services cancelled (IB and SMS alert)			
Closed Pay ID			
Direct entry authority cancelled			
Periodical payment authority cancelled			
Overdraft cancelled			
Close signatory RIM			
CRM Customer closure email/letter			
Deregister App from DMC			
Exit worksheet			
Balance payable	\$		
Date closure processed	/ /		
Transfer to account			
Account closure letter sent			
Actioned by Op number and initials			

Checked by Op number and initials

Office use only		
Customer name		
Signatories		

Visit us at your nearest branch bankaust.com.au/support/branches Mailing something? 7-9 Seymour Street, Traralgon VIC 3844 Email us mail@bankaust.com.au Talk to someone 132 888

Bank Australia Limited ABN 21 087 651 607 AFSL/Australian Credit Licence Number 238431

