

Personal details

Customer name

Customer number

Address

Postcode

Account closure

I request that all accounts opened in my name be closed and the credit balance be paid as follows:

Transferred to Bank Australia account number

OR provide bank transfer details

BSB

Account number

Title

I acknowledge that all access to products and services linked to my accounts will cease upon closure of this account.

OR

I request that the below account/s be closed and the credit balance paid as follows:

Account numbers to be closed

Transferred to Bank Australia account number

OR provide bank transfer details

BSB

Account number

Title

I acknowledge that all access to products and services linked to my accounts will cease upon closure of this account.

- **Regular deposits** to account/s closing payroll credits, social security, superannuation, interest payments etc. must be cancelled by notifying the appropriate organisation(s). Yes No
- **rediCARD** If no longer required, the card must be returned, or linked to Bank Australia account number Yes No
- **Visa Debit card or Visa Credit cards** Return cards, sign a letter stating the card was destroyed, or link to Bank Australia account number Yes No

- **Credit card or Overdraft facility** All outstanding debt must be cleared prior to the closure of the account(s) Yes No
- **Insurance policy with Bank Australia** Please contact one of our insurance consultants to make the appropriate arrangements. Yes No
- **Direct Debit Authority or re-occurring Visa payments** You should contact the relevant organisation(s) to arrange for the cancellation of the Direct Debit Authority or arrange to debit another account. Yes 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	<input type="text" value="/ /"/>		
Card returned/Letter completed	<input type="text" value="/ /"/>		
Services cancelled (IB)	<input type="text" value="/ /"/>		
Insurance policy cancelled	<input type="text" value="/ /"/>		
Direct entry authority cancelled	<input type="text" value="/ /"/>		
Periodical payment authority cancelled	<input type="text" value="/ /"/>		
Merchant facility returned	<input type="text" value="/ /"/>		
Overdraft cancelled	<input type="text" value="/ /"/>		
Close signatory RIM	<input type="text" value="/ /"/>		
Outstanding loan security cancelled/released	<input type="text" value="/ /"/>		

Exit worksheet

Balance payable	\$		
Date closure processed	<input type="text" value="/ /"/>		
Transfer to account			
Account closure letter sent	<input type="text" value="/ /"/>		
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?
50 Moore Street, Moe VIC 3825

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