

**Corporate Business Banking
Account(s) Closure Form**

Date: ___ / ___ / _____

Branch Name: _____

<input type="checkbox"/> All Accounts Under CID:														
Company Name:														
<input type="checkbox"/> Following Accounts to be closed:											Title			

Reason for Account closure	
<input type="checkbox"/> Maintains other account(s) and no longer requires this one	<input type="checkbox"/> Rejection of loan / non eligibility for lending products
<input type="checkbox"/> Closure of business	<input type="checkbox"/> Unresolved complaint
<input type="checkbox"/> ADCB range of products/fees and charges ok	<input type="checkbox"/> Prefer Islamic finance /Conventional
<input type="checkbox"/> Service Issues _____	
<input type="checkbox"/> Other _____	

Please issue a release letter (charges are applicable)

I/We hereby authorise the Bank (ADCB) to deduct from the above account(s) all charges and any other amounts owned by me/us and settle the balance outstanding in cash/by Banker's cheque/by transfer to:

Beneficiary Name:	Beneficiary Address:
Bank Name & Address:	Transfer Currency:
Beneficiary Account Number/IBAN:	Transfer Amount:

Authorised Signatory(ies):		
	Name	Signature
1		
2		
3		

By signing the above, I/we confirm that I/we have read and understood the Terms & Conditions (of ADCB Relationship) governing the Account Closure and I agree to abide by such Terms & Conditions (as printed on the back of this form "CSC")

Bank Use Only:		
<input type="checkbox"/> I certify that the above named person(s) placed his/her/their signature(s) in my presence		
<input type="checkbox"/> I verify that the signature(s) of the above person(s) has been verified by me to match the FCR client signature		
RM/RO: _____	_____	_____
(name/stamp)	(signature)	(date)
Check List:		
<input type="checkbox"/> In case of transfer outside ADCB, customer to provide all beneficiary details above		
<input type="checkbox"/> Demand Draft/Banker Cheque is to be sent to RM [_____] Address :[_____]		
<input type="checkbox"/> Customer request is updated on Itqan. SR Number: _____		
<input type="checkbox"/> Customer signature(s) is available in FCR and verified		
CPD Maker: _____	_____	_____
(name)	(signature)	(date)
CPD Checker: _____	_____	_____
(name)	(signature)	(date)