

Please use **BLOCK LETTERS**.

* Delete as inappropriate.

Please *√* where applicable.

Branch

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Personal Information

Account Name:

	Currency	Account Number		Currency	Account Number
1.	<input type="text"/>	<input type="text"/>	3.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	4.	<input type="text"/>	<input type="text"/>

Account Termination Details

*1/ We wish to close the above mentioned account with immediate effect.

Please arrange for the credit balance of

Currency	Amount:
<input type="text"/>	<input type="text"/>

 from the account to be paid as follows :

Credit to another account with SCB

Currency	Account Number:
<input type="text"/>	<input type="text"/>

Account Name:

Remit the proceed to other Bank by *Demand Draft/ Cashier Order:

	Currency	Account Number:	
Beneficiary Account Number:	<input type="text"/>		
Beneficiary Name:	<input type="text"/>		
Name of Bank:	<input type="text"/>		
Address:	<input type="text"/>		

Withdraw the proceeds in cash.

Other instructions:

With the closure of the above mentioned account, I understand that the following facilities linked to this account will be cancelled with immediate effect:

Personal Loan Credit Card and Personal Credit Others (Please specify): _____

*My/ Our reason for closing the above account is:

Signature of Account Holder (1 – PRIMARY):	Signature of Account Holder (2 - JOINT):	Signature of Account Holder (3 - JOINT):	Signature of Account Holder (4 - JOINT):
Name:	Name:	Name:	Name:
Passport/ ID Number	Passport/ ID Number	Passport/ ID Number	Passport/ ID Number

Note: a. For cancellation of Credit Card Account, please return the above mentioned Credit Card to the Bank.

b. With the cancellation of the Principal Credit Card, the Supplementary Credit Card Account(s) will be cancelled.

For Bank Use Only

<p>Receiving/ Processing Branch: <input type="text"/></p> <p>Processed on: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table></p> <p>Reason Code: <input type="text"/></p> <p>Relationship No.: <input type="text"/></p> <p>Master No.: <input type="text"/></p>	D	D	M	M	Y	Y	Y	Y	<p>Signature Verified by:</p> <p>Branch Officer Signing No. ()</p>	<p>Processed by:</p>	<p>Checked by:</p>
D	D	M	M	Y	Y	Y	Y				

CLAF Ver1.0

Bank's Copy