



# Gibraltar Savings Bank

## ORDINARY DEPOSITS

### Account Closing Form



This form is to be submitted together with your Passbook and collected the following working day with your final withdrawal (if under £1,000.00) or confirmation of your Bacs payment (if over £1,000.00) or GSB Account transfer.

Account Name

Account No

*(Processing Officer)*

*For Office use*

Partnership Client No

Tel No / E-mail

*For office use*

*Account Holder 1*

*Account Holder 2*

*Account Holder 3*

*Account Holder 3*

Client Names

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Client No

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Closed *(EO)*

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Other Accounts Held

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Current Balance

£

Tick if over £1,000.00

Amount in words



Please complete the below if balance amount upon closure is over £1,000.00, and payment must be made via Bacs (proof of account is required) or if you wish to transfer the monies to another GSB Account.

Institution Name

Account No

Sort Code

Account Name

**YOUR ACCOUNT WILL CEASE TO EARN INTEREST THE DAY THIS FORM IS SUBMITTED.**

Signature(s)

*Account Holder 1*

*Account Holder 2*

*Account Holder 3*

*Account Holder 3*

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*All account holders must sign*

Date

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*For office use*

<b>Cashier</b>	<b>Processing officer</b>	<b>EO</b>
Date /	Date Payable / /	Date / /
Passbook attached	BW Account Closed / /	Interest Check
Indemnity	Current Balance £	Paid / /
<b>Paid via:</b>	Interest To date £	Review Date / /
Cash	Total Payable £ <input style="width: 80%; height: 30px;" type="text"/>	AML Partnership Closed
Account Transfer		AML Individual Closed
Bacs		