



**COMPANY INFORMATION**

Client Name: \_\_\_\_\_

Tax ID Number (If foreign please indicate "Foreign"): \_\_\_\_\_

**ACCOUNTS TO BE CLOSED**

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

**REASON FOR CLOSURE**

Brief explanation for closure: \_\_\_\_\_

**REMITTANCE INSTRUCTIONS**

Transfer Funds to Another SVB Account

Name on Account: \_\_\_\_\_

Account Number: \_\_\_\_\_

Cashier's Check Request

Payable To: \_\_\_\_\_

Attn: \_\_\_\_\_

Mailing Address (may **not** be a PO Box): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**AUTHORIZATION**

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Authorized Signature\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\*To be used only if Client's SVB Bank Depositor Agreement specifies that two signatures are required.