

Authorization to Close Accounts

After setting up your new accounts with Alpine Bank, leave your old accounts active until all your checks and automatic withdrawals clear. This process may take several weeks.

Once you're sure that your old accounts are inactive, provide this form to your previous financial institution to authorize the closing of your accounts.

Please close my accounts at:

Name of Financial Institution: _____
(please print)

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Effective date for the account closing: _____

Account Numbers: _____

Names on Accounts: _____

Social Security Number: _____

I hereby authorize and instruct the named Financial Institution to close my accounts indicated above.
Please send a check for the remaining balance to my address listed on this form.

Authorized Signature: _____ **Date:** _____

Printed Name: _____

Address: _____ **Phone:** _____

City: _____ **State:** _____ **Zip:** _____



Alpine Bank

alpinebank.com

1.888.4.ALPINE



Member FDIC

