

## **Account Closing Request/Advice**

Bi	ranch			Date:	
Please close my/our following a	ccount				
Name:					
Account Number:					
All unused cheque ( ) a	re returned	(	) are lost.		
Received cash ( )	) after debit my/ our account no.				
Reasons for closing (If any)					
I hereby declare that I don't have authorize the Bank to recover the Bank to recover the Signature of Account Holder	•			nk and if any	found in future, I hereby
	For Rat	nk's Use (	Only		
Department		jection		for objection	
Digital Operations	Yes	No		<u> </u>	
CAD Department	Yes	No			
Finance Department	Yes	No			
Central Operation Department	Yes	No			
Compliance Department	Yes	No			
Verified By,				Autho	rized By,
Name:				Name:	
Employee Code:				Emplo	yee Code:



## Account Lien/Release And Block/Unblock

	Date	
The Branch Manager,		
Kamana Sewa Bikas Bank Ltd.		
Branch		
Subject: Lien Mark/	Account Freeze	
Account Lien Mark/Release:		
Please mark lien over in account no	`	
Please release lien over from account no (In words:	,	
Account Block/Unblock:		
Please block account no (Cu notice.	astomer Name) for de	ebit/credit/total until further
Please unblock instruction from account a debit/credit/total until further notice.	no	(Customer Name) for
Purpose:		
Verified By,	A	Authorized By,
Name:		Name:
Employee Code:	E	Employee Code: