处 Santander

BUSINESS BANKING

Account Closure Request

Business Banking Customers only

Please fill in the form using BLOCK CAPITALS and black ink. Tick any boxes which apply.

An illegible or incorrectly completed form is likely to lead to delays. Section 4 must be completed in accordance with signing instructions on the account (with the exception of Limited Companies for which all directors are required to sign). Closure will be actioned within 5 working days of receipt of this form subject to all information being correct and security checks (if required). All debit balances on the account(s) must be repaid before closure.

1 Your details	
Business name	Account numbers – please detail all accounts that you would like
	to close Sort code Account number
Current Business/Trading Address	
Postcode	
2 Movement of credit balances	
Transfer to another account (if transfers to more than one account	Send me a cheque
are required, please complete the transfers via online, mobile or	(cheque will be sent out in business name)
telephone banking before submitting the closure request)	
Account Name	Sort code Account number
3 Reason for closure	
My business has closed Account charges	Other
wasn't satisfied with the	
customer service	
4 Your authorisation	
I authorise the closure of the accounts detailed in section 1 and the n	novement of credit balance(s) requested in section 2 (if appropriate)
Name in full	Name in full
Signature	Signature
Date DDMMYYYY	Date DDMMYYYY
Name in full	Name in full
Signature	Signature
Date D D M M Y Y Y	Date D D M M Y Y Y
Closure request to be faxed to 0844 800 9988 (please make sure the correct number is input to ensure	

data is received by Santander) or sent via post to Santander Business Banking, Bridle Road, Bootle, L₃O 4GB.

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