



DEPOSIT ACCOUNT CLOSURE REQUEST

PART 1: Account Information			
Account Title	Account Number		
PART 2: Funds Disbursement Options			
Mail a check to the address on record			
Wire Funds to a linked SPTC account (only available if linked	account is still open)		
Mail a check to an alternate address indicated below (Part 5 r	must be completed if this is checked)		
Address	City	State	ZIP Code
Note: Closeout check will be made payable to the account title of record:			
PART 3: Closure Details			
Reason for the CAA closure:			
Linked SPTC account is closing			
CAA is not used			
Account owner is deceased (Death Certificate or additional c	locumentation may be required)		
Account service issue (please explain):			
Other (please explain):			
DART 4: Signature (required)			
PART 4: Signature (required)			
The individual signing below must be an account owner or an author "Account Closing" section of The Bancorp Bank, N.A. Account Agre			ınt. Please refer to the
Signature of Account Owner/Authorized Signer	Date (mm/dd/yyyy)		
Print Name			

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PART 5: Notary Acknowledgment

State of (County of			
State	County			
Subscribed and sworn to before me, a Notary Public,	olic, this	day of		
	Day	Month	Year	
by		, who proved to	me on the basis of satisfactory	y evidence to be the person
Claimant				
WITNESS my hand and official seal:		Seal:		
Signature of Notary Public				
Print Name of Notary Public				
NA				
My commission expires:				

Please **mail or fax** this completed form to the address below. Please note that if a notary is required because an alternative address is being used, the original notarized document must be mailed. The account closure will be processed after we have received all documents needed to validate the request.

SEI Cash Access Attn: Customer Service Center 409 Silverside Road, Suite 105, Wilmington, DE 19809

Fax: 302.791.5792