

Transaction Account Closing Form – Business Entity

Please complete the Form in clear and legible capital letters

Please indicate the account type you wish to close

Transaction account for national payment transactions	<input type="checkbox"/>
Transaction account for international payment transactions	<input type="checkbox"/>

Applicant information

Applicant name – business entity	
Represented by (please indicate the name of the authorized person and his/her Citizens' Register number - JMBG)/passport number for non-residents)	
Place / Head Office Country of head office (for non-residents)	Address
Contact telephone	Fax
E-mail	Website
Company identification number – business entity	
Number of the transaction account to be closed	
Number of the transaction account to which the assets are to be transferred	
Reason for account closing	

By signing this Form I confirm that the information provided is correct and I hereby authorize the Bank to verify all information provided.

Place	Signature of the authorized representative
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STAMP

If the use of stamp/seal is required by the law, other regulation or by the other general act (Articles of Association and similar) of the legal entity which you are representing, you are obliged to use it in the business relationship with the Bank

To be completed by the Bank

Branch office	Date
Application received by	
Signature	Application approved Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason, if the application was denied	By (name of the Bank employee)