Account Closure Application

To  
The Branch Manager  
State Bank of India  
Akola Branch (Br Code-06996) Branch Adress: Gupte Marg Jathar peth Akola.   
  
Date: 25/07/2025  
  
Subject: Request for Closure of Savings Bank Account – A/C No. 32030605323  
  
Dear Sir/Madam,  
  
I am writing to formally request the closure of my savings account bearing number 32030605323 held at your branch. Due to personal reasons, I no longer wish to continue operating this account.  
  
I kindly request you to:  
1. Close the mentioned account at the earliest.  
2. Transfer any remaining balance (if any) to my active account (details below), or issue a demand draft/cheque as applicable.  
3. Acknowledge receipt of this application and confirm the account closure process.  
  
Please find attached:  
- A copy of my self-attested Aadhaar Card and PAN Card (KYC documents)  
- Passbook (if available)  
- ATM/Debit card (if applicable, else mention it's lost)  
- Cancelled cheque or bank account details for balance transfer  
  
Alternate Account for Balance Transfer (if applicable):  
A/C No: 00000042624228801  
Bank & Branch: SBI, MIDC, HINJEWADI  
IFSC Code: SBIN0010203  
  
I declare that there are no outstanding dues or liabilities against my account and request you to process this closure as per standard procedure.  
  
Thank you for your assistance.

Yours sincerely,  
Suyash Ashok Joshi  
SBI A/C No: 32030605323  
Mobile: 7768067432  
Email: suyash.joshi27@gmail.com  
Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_