

Member Request to Close Account

Before closing an account on FSP, verify all loans and mortgages have been paid in full. See "Scrolling Messages" for additional open mortgage information.

Member Number	Date
Primary Account Owner (please print)	
	account owner signatures are required to tter can be provided in lieu of this form.
Reason for closing account(s) Draft/checking All direct deposits and withdrawals have All written checks & approved Visa trans Shred unused checks for member (if poss Destroy Visa Check Card(s) Close Visa Check Card(s) on FSP	been stopped by member actions have cleared the account
	s, checking, certificates, IRA accounts) investment accounts to primary share, disburse funds account, refer the member to the credit union IRA
	x, a 14 day waiting period applies before the account uld complete this "request to close account" form and
Credit Card ☐ Our loan department will verify the Credit are not "real time" so are not current.	it Card balance owed. The balances shown on FSP
I understand that I will no longer be a member closing this account, unless I am the owner	per of Syracuse Cooperative Federal Credit Union by of another open account.
Primary Member Signature	Date
Joint Member Signature(s)	Date
Cooperative Federal Staff Signature: Declassify the member in Member Details.	Dateails Tool