

A/C NO				Ва	• Your Listening, Caring Partner
NAMES					
DATE					
The Manager					
Dear Sir/Madam					
RE: ACCOUNT CLOSURE					
This is to notify you of my/our intention to close					
Kindly complete the following information					
1. What mode of payment would you prefer? <b>Ch</b>	eque	Transf	erCa	sh	
If transfer, indicate beneficiary account     Names			No.		
<ul> <li>4. Have you ever banked with any other bank oth</li> <li>5. If yes how do you compare Equity Bank to oth</li> <li>Good Fair</li> <li>6. Rank the following Equity services</li> </ul>	·	y? <b>Yes</b>	No		
(Tick appropriately)	Very Good	Good	Average	Poor	
a) Accessibility					
b) Staff willingness to assist clients					
c) Speed/quality of service					
d) Pleasantness of staff					
e) Physical facilities/appearance of the bank					
7. Given a chance would you bank with us again	?				
Other remarks:					
Thank you for banking with Equity Bank					
Yours Faithfully,					
Name	ID No.			nature	

EB 023