

Account Closure



Please print, sign and return this document to us via post or email:

Post: Freepost Rabobank Online Savings, PO Box 38567, Wellington 5045

Email: ClientServicesNZ@rabobank.com

Your Details

Customer number

Full name

Email

Postal address

Street address

Suburb

City/Town

Country

Postcode

If you are providing an address that is different to what we hold on record, please send us address verification evidence - a bank statement, utility bill or government issued letter showing your name and new address details. If you do not have this or are unsure what we hold on record, please call us on 0800 22 44 33, Monday-Friday 8am-6pm.

Account/s to Close

I / we wish to close all of my/our accounts and end the relationship with Rabobank Online Savings

I / we wish to close my/our

Individual account Joint account Minor/child account Business account Trust account

Account name(s)

The remaining balance and any interest owed will be paid back to the nominated account once the closure is complete. Please call us on 0800 22 44 33 if your nominated account is no longer active.

Signed by Account Owner(s) / Authorised Signatory

Signature 1

Signature 2

Date

Date

Please select the final documents you require and how you'd like to receive them:

Closing bank statement IR15 certificate None required

Email Post