



Joint Account Closure

(Only for Personal Current and Deposit Account(s) with credit balances)

Please use this form to close a joint account following the death of an account holder.

Details of the acc	count																	
Name of the joint																		
account holder who																		Щ
has died (the " Deceased ")																		
Name of surviving																		
account holder (1)																		
Name of surviving account holder (2)																		
Name of surviving account holder (3)																		
Current account number (the "Account")																		
, 1000 4111 /																		
Details of where	to tro	nefor	. +b.o	L -	Jan			+ b.		 								
Details of where	to tra	lisiei	trie	Da	llai	ICE	. 01	UII	e a	 un								
Payee Name																		
For an Irish / EU acco	unt																	
IBAN																		
For non-EU/Internation	onal ac	count																
Full address of Payee																		
Account Number						L												Ш
Country																		
Bank's Name																		
Bank's Address																		
SWIFT/BIC																		

Instructions to pay

This section must be completed by all surviving account holders in the presence of a solicitor or AIB bank official.

As the surviving joint account holder(s), I/we hereby instruct and authorise Allied Irish Banks, p.l.c. to close the Account and transfer the money held in the Account to the account of the payee detailed above.

SURVIVING ACCOUNT HOLDERS							
NAME		SIGNATURE					
NAME		DATE Day Month Year SIGNATURE					
NAME		DATE Day Month Year SIGNATURE					
		DATE Day Month Year					
WITNESS This form must be witne	ssed by a solicitor or AIB b	ank official.					
WITNESS NAME							
SIGNATURE		WITNESS BRAND AND DATE					
If you are closing a Joint Deposit Aco of more than €50,000, a Tax Clearar		ed was a party to the Account(s) with a total combined balance oust be provided.					
This does not apply where the partice Proof of relationship in the form of a	es to the Account(s) were n Marriage Certificate or Civ	s) without a Tax Clearance Certificate (Form IT8). narried or civil partners at the time of the Deceased's death. vil Partnership Certificate or confirmation of the marriage/civil 's estate will need to be provided to the bank before funds					
FOR INTERNAL USE							
Confirm the Bank has a certified copy of the Death Certificate							
Check and confirm Survivorship app	olies to Account(s)						
Tax Clearance Certificate or Marriag	e Certificate /Civil Partners	nip Certificate received					
Authorised Official							
Staff Number							
Date							