

# b-packaged® and b-entertained® closure request



Please use this form to close your Community Sector Banking b-packaged or b-entertained account.

Return this form by email to [customerservice@cspanking.com.au](mailto:customerservice@cspanking.com.au), by mail to Community Sector Banking, PO Box 585, Corrimal, NSW, 2518, or by fax to 02 4255 8420.

## 1. Account Details

Your organisation/employer name: \_\_\_\_\_

Account holder's name: \_\_\_\_\_

Account/customer number: \_\_\_\_\_

## 2. b-packaged Account Closure Details

What date would you like your account closed?      /      /

- Direct Debits - Please ensure you cancel any direct debits you have set up with external companies; and if you have provided your card number to a company, you should notify the company directly in writing or by phone to request cancellation of the direct debit. Direct Debit dishonour fees will apply for direct debits that are not cancelled.
- Periodical Payments - Community Sector Banking will cancel all periodical payments on this account.

How do you want the balance of funds held in the account disbursed? Please choose one of the following options:

1. Into an existing Community Sector Banking, or Bendigo & Adelaide Bank, account number: \_\_\_\_\_  
Account name: \_\_\_\_\_
2. Via Electronic Funds Transfer to:  
Account name: \_\_\_\_\_  
BSB:      -      Account Number: \_\_\_\_\_
3. Cheque made payable to: \_\_\_\_\_  
*Note, a bank cheque fee will apply and be charged to this account.*

## 3. b-entertained Account Closure Details

What date would you like your account closed?      /      /

How do you want the balance of funds held in the account disbursed?  
Please note: Any remaining balance is to be returned to the employer or Salary Packaging Provider.

Please choose one of the following options:

1. Into an existing Community Sector Banking, or Bendigo & Adelaide Bank, account number: \_\_\_\_\_  
Account name: \_\_\_\_\_
2. Via Electronic Funds Transfer to:  
Account name: \_\_\_\_\_  
BSB:      -      Account Number: \_\_\_\_\_
3. Cheque made payable to: \_\_\_\_\_  
*Note, a bank cheque fee will apply and be charged to this account.*

**4. Authorisation**

Please arrange to have the above mentioned account/s closed and the balance of funds returned as detailed in section 2 and 3 above.

Approved By (Name of Verifying Officer): \_\_\_\_\_

Signature of Verifying Officer: \_\_\_\_\_

Date:     /     /

**Office Use Only**

**b-packaged**

First step actioned:     /     /

Second step actioned:     /     /

Comments                    Stops

Card cancelled            Balance details

**b-entertained**

First step actioned:     /     /

Second step actioned:     /     /

Comments                    Stops

Card cancelled            Balance details