



Account Closing Application Form

Personal Information
Name:
Trading Account Number:
Identity card/ Passport No. :
Mobile No. :
Bank Name& Address (Includes Country and City) :
Payee Name:
Payee Account Number (Can be used to receive fund):
Account Closing Reason:
Note:1. Please attach a scanned copy of the ID card. 2. Please fill in the required information in the application form and email to web@AMBRYsun.net as an attachment.
Photocopy of ID Card(Front)

Signature of Applicant:_____

Date:_____