

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]

[Date]  
[Bank/Financial Institution Name]  
[Branch Address]  
[City, State, Zip Code]

Subject: Request for Closure of PPF Account

Dear [Bank Manager's Name],

I am writing to formally request the closure of my Public Provident Fund (PPF) account (Account Number: [Your Account Number]) held at your branch.

Due to [reason for closure, e.g., personal reasons, requirement for funds], I wish to withdraw my entire balance and close my account as per the rules.

Please process my request and provide me with a confirmation regarding the closure. I have attached all necessary identification and documents needed for this process.

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]