



Payment Authorisation Form

To: EBS

I / WE

being the Executor(s) / Administrator(s) / next of kin of the late :

_____ deceased

hereby authorise EBS to close the following accounts:

and issue a cheque/s representing the closing balance(s) in relation to all monies held in EBS for and behalf of the late

_____ deceased

Make the Closing Cheque(s) payable to:

Signatures of Executor(s)/Administrator(s)

*Witnesses (Solicitor or EBS Official)

*EBS official must brand with branch brand OR Solrs Brand

