

## ACCOUNT CLOSURE REQUEST FORM

Trading

DP Trading & DP

CDSL DP ID: 12085000

Date:

Closure initiated by	DP 🗌	CDSL 🗌	BO (To be filled by the BO.	Please fill all the details in Block Letters in	n English)
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Dear Sir / Madam,

I / We the Sole Holder / Joint Holders / Guardian (in case of Minor) / Clearing Member request you to close my / our account with you from the date of this application. The details of my/our account are given below:

#### Account Holder's Details

DP ID	1	2	0	8	5	0	0	0	С	lient ID*									
Name of the First	: / Sol	le Ho	lder																
Name of the Seco	ond H	loldei	r																
Name of the Thire	d Hol	der																	
Correspondence/	Perm	aner	nt Ado	dress															
City										State				PIN	1				

#### Details of remaining security balances in the account (if any)

Reasons for Clos	sing t	he Ao	count	t															
Balance remainin	artly	rtly rematerialized and partly transferred.									Rematerialized								
	ransf	ansferred to another account (Number given below)									Not applicable								
DP ID									Client ID										
Balance present in a/c for (To be filled by DP, if applicable) Ear - marked Pledge * If DP or CDSL initiates account clos * In cases of transfer cum closure , ki							Pledg	jed [	🗌 Lock-in 📋 Pe	nding	for De	emat	eriali	zatio	n 🗌	Pen	ding	for rematerialization	Frozen.
										,	•		nsferee	e's BO	a/c.				

### DECLARATION: In case of Account Closure due to SHIFTING OF ACCOUNT:

I / We declare and confirm that all the transactions in my / our demat account are true / authentic.

	First / Sole Holder Signature	Second Holder Signature	Third Holder Signature
Signature*	R	æ	R

# ACCOUNT CLOSURE REQUEST FORM (TRADING)

To,

Nidhi Broking Services Pvt. Ltd

Dear Sir,

I/We the holder of the trading a/c request you to close my/our account with you from the date of this application. The details of my/our account are given below:

Name of client :				Trading	kyccode :	
Segments for closure:	🗆 BSE 🗌					

Reasons for closing the account Service issue Shifting to competion Not interested in trading Other (

Signature of C	Client	Branch Approval	
For Office Use Only			
Maker	Checker	Branch Received Stamp	
		Acknowledgment Receipt	Date:

DP ID	1	2	0	8	5	0	0	0	Client ID							Trading kyc code :
Name of the First / Sole Holder																
Name of the Seco	ond H	lolder	r													
Name of the Thir	d Hol	der														
Reason for Closu	ire															

Instructions to Account Holder(s): 1. Submit a duly-filled RRF if the balances are to be rematerialized.

2. Submit a duly-filled transfer form (off market instruction slip) if the balances are to be transferred to another A/c.