

ANNEXURE Q APPLICATION FOR CLOSING AN ACCOUNT

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To	DDIV/ATE LIMITED			Date)	M	M	Υ \	Υ '	Y
CONSORTIUM CAPITAL												
22, R.N. Mukherjee Roa Kolkata-700001	30, 2 Floor											
DP ID: IN303727												
DP ID. INSUS727	Instruction	to the	annlica	nt								
Closure request need	Instruction to ds to be signed by all the account Instruction to description in the second Instruction to description to description to description in the second Instruction to description to descripti				ure plea	se ens	ure th	e follo	wing:			
holders, POA Holder(if any) cannot sign the closure request I. At least one of the account holder visits the branch												
Corrections (if any) have to be authenticated by all the holders.		II. III.	He/she carries a valid original identity proof for verification. Additionally, for obtaining waiver of charges please note:									
3. Closure request would be rejected in case of any		IV.										d of
outstanding charges & account would be suspended for		.,	The target account should be in same combination of names and of same type/subtype as source account. Submit Client Master List duly stamped & signed by an official of									
debit & credit. 4. Please strike-off "NA" for details which are not applicable.		V.	target D		aster Lis	st duly	stamp	ed & s	igned	by an of	ificial o)Ť
	est you to close my/ our acc	count			s per	follo	owi	ng d	etai	ils:		
, 110 110 110 100 1 10 100	Name of the		-	7 0 0. 0.	<u> </u>							
Sloe/First Holder			X - 1								-	
Second Holder												
Third Holder												
Reason/s for Closure of	Depository Account:											
Client Id (of the accoun											_	
DP ID (of the account to	o be closed)	N										
			I	I I								
Please tick the applicab												
Option A [There ar	re no balance/holding in this acc	count]									
Option B	Transfer to my/our own	1										
[Transfer the	account (provide target		Target Account Details									
balances/holdings in	account details & enclose		□NS	DL	DP	I	N				\Box	
this account as per	Client Master report of targe	et			ID							
details given]	account duly stamped &		☐ CD	SL	ВО							
	signed)				ID							
	Transfer to any other						1					
	account (submit duly filled											
	Delivery Instruction Slip sign	ied										
	by all holders)											
Option C [Remate	riasilse/Reconvert (submit duly	filled	Remat/	Recor	iversi	on Re	que	st fo	rm fo	or Mu	tual F	und]
I/We confirm to ha	ave surrendered all unutilized de	eliver	y instruc	tions	slips							
I/We confirm to ha	ave exhausted all delivery instru	ıction	slips/mi	isplace	ed/no	t trac	eab	le				
	·			•								
Signature(s):												
Sloe/First Holder												
Second Holder												
						_	_	_	_			
Third Holder												