ANNEXURE Q

APPLICATION FOR CLOSING AN ACCOUNT
(For Beneficiary Account only)

Date:

To,
Depository Back Office
67, Sonawala Building, Opp. Stock Exchange Building,
B. S. Marg, Fort, Mumbai - 400 023

1. I / We hereby request you to close my/our account with you as per following details:

Name of the holder(s)	
Sole/ First Holder	
Second Holder	
Third Holder	

2. Reason/s for Closure of depository account: ____________________

3. DPID (of account to be closed) | | | | | | | | |

4. Client ID (of account to be closed) | | | | | | | | |

5. Please tick the applicable option(s)

❏ **Option A** [There are no balances / holdings in this account]

❏ **Option B** [Transfer the balances / holdings in this account as per details given]	Transfer to my / our ownaccount *(Provide target account detailsand enclose Client Master Report of Target Account)* Transfer to any other account *(Submit duly filled Delivery Instruction Slip signed by all holders)*	**Target Account Details**		
		❏ NSDL	DP ID	
		❏ CDSL	Client ID	

❏ **Option C** [Rematerialize / Reconvert (*Submit duly filled Remat / Reconversion Request Form-for mutual fund units*)]

6. Signature(s)

Sole / First Holder	
Second Holder	
Third Holder	

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Acknowledgement			
We hereby acknowledge the receipt of your request for closing the following Account subject to verification:			
DP ID		Client ID	
Name of Sole / First Holder			
Name of Second Holder			
Name of Third Holder			
Signature of the Authorised Signatory **Date**		**Seal/ Stamp of Participant**	