

To,
KIFS TRADE CAPITAL PVT. LTD.

B -81/82, Pariseema Complex, C. G. Road,
Ellisbridge, Ahmedabad-380 006.

DP ID : IN 301485 / IN 302700

Date

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M	M
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Y	Y	Y	Y
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1. I/ We hereby request you to close my/our DP and Trading account with KIFS Trade Capital Pvt. Ltd. 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. Client ID

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 Trading Code :- _____

4. Please ticke the applicable option(s)

<input type="checkbox"/> Option A { there are no balances / holdings in this account }																											
<input type="checkbox"/> Option B {Transfer the Balances / Holdings in this account as per details given}	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; vertical-align: top;"> <input type="checkbox"/> Transfer to my / our own account (provide target account details and enclose Client Master Report of Target Account) <input type="checkbox"/> Transfer to any other Account (Submit duly filled Delivery Instruction Slip signed by all holders) </td> <td style="width: 80%; text-align: center;"> Target Account Details </td> </tr> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> NSDL </td> <td style="vertical-align: top;"> DP ID <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> </td> </tr> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> CDSL </td> <td style="vertical-align: top;"> Client ID <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> </td> </tr> </table>	<input type="checkbox"/> Transfer to my / our own account (provide target account details and enclose Client Master Report of Target Account) <input type="checkbox"/> Transfer to any other Account (Submit duly filled Delivery Instruction Slip signed by all holders)	Target Account Details	<input type="checkbox"/> NSDL	DP ID <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>											<input type="checkbox"/> CDSL	Client ID <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>										
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<input type="checkbox"/> Option C { Rematerialise / Reconvert (Submit duly filled Remat / Reconversion Request form-for mutual fund units) }																											

5. Signature(s)

Sole / First Holder	
Second Holder	
Third Holder	

Acknowledgement

We hereby acknowledge the receipt of the your request for closing the following Account subject to verification :

DP ID In301485/ In302700	Client ID <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>											Trading Code :- _____
Name of Sole / First Holder												
Name of Second Holder												
Name of Third Holder												
Signature of the Authorised Signatory	Seal/Stamp of Participant											
Date												