KIFS TRADE CAPITAL

FORM - 34

APPLICATION FOR CLOSING AN ACCOUNT (For Beneficiary Account Only)

Date D D M M Y Y

ΥY

To,

KIFS TRADE CAPITAL PVT. LTD.

DP ID : IN 301485

KIFS CORPORATE HOUSE Iskon-Ambli Road, Nr. Ashok Vatika BRTS, Ambli, Ahmedabad-380054

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						Trading Code :													
4. Please ticke the applicable option(s)																			
Option A { there are no balances / holdings in this account																			
Option B		Transfer to my / our own account (provide target						Target Account Details											
{Transfer the Balances /	acco	ccount details and enclose lient Master Report of						N	SDL	DP ID									
Holdings in this account as per	Targ	Target Account)								Client									
details given		nsfer to a bmit dul	-						DSL	ID									
	İnst	ruction S	-		-														
all holders)																			
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 Clie	nt ID								Trading Code :-										
Name of Sole / First Ho	ame of Sole / First Holder																		
Name of Second Holde																			
Name of Third Holder																			
Signature of the Authorised Signatory										Seal/Sta	mp o	f Par	ticipa	nt					
Date																			