



Suresh Rathie

Wealth Creator thru Systematic Investment

EQUITIES • CURRENCY • DP • NBFC • MUTUAL FUND

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Appl. No.....

ACCOUNT CLOSURE REQUEST FORM

Date :

Closure Initiated by ☐ BO ☐ DP ☐ CDSL

(To be filled by the BO (in case of BO-initiated closure). Please fill all the details in **BLOCK LETTERS** in English)

CLOSURE FOR ☐ Only Trading A/c ☐ Only Demat A/c ☐ Both (Please Tick (✓) whichever is applicable)

DPID	1	2	0	1	2	1	0		BO ID	0	0					
Trading Code								Branch								

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:															
Name of the First / Sole Holder															
Name of the Second Holder															
Name of the Third Holder															
Address for Correspondence:															
City:															
State:															
PIN:															

DETAILS OF REMAINING SECURITY BALANCES IN THE ACCOUNT (IF ANY)															
Reasons for Closing the Account															
Balance remaining in the account (if any) to be :															
<input type="checkbox"/> Partly rematerialised and partly transferred. <input type="checkbox"/> Rematerialised															
<input type="checkbox"/> Transferred to another account (Number given below) <input type="checkbox"/> Not applicable															
DP ID:								Client ID							
Balance present in a/c for (To be filled by DP, if applicable)															
<input type="checkbox"/> Ear - marked <input type="checkbox"/> Pledged <input type="checkbox"/> Pending for Dematerialisation <input type="checkbox"/> Frozen <input type="checkbox"/> Pending for Rematerialisation <input type="checkbox"/> Lock-in															

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					Second Holder					Third Holder				
Name															
SIGNATURE															

Application No.

ACKNOWLEDGEMENT RECEIPT

Date :

We hereby acknowledge the receipt of the your instruction for Closing the following Account subject to verification:

DPID	1	2	0	1	2	1	0		BO ID	0	0					
Trading Code								Branch								

Name of the First / Sole Holder															
Name of the Second Holder															
Name of the Third Holder															
Reason for Closure															

Depository Participant Seal and Signature

INSTRUCTIONS TO ACCOUNT HOLDER(S):

- Submit a duly-filled RRF if the balances are to be rematerialized.
- In case of **TRANSFER CUM CLOSURE**, reason for closing the account should be "**SHIFTING OF ACCOUNT**".
- In case of **TRANSFER CUM CLOSURE**, latest Client Master Report (DPM generated) duly stamped & signed by official of the new DP is required.
- * If DP or CDSL initiates account closure, Signature(s) of account holder(s) not required.