

ANNEXURE Q
APPLICATION FOR CLOSING AN ACCOUNT

(For Beneficiary Account only)

To,
SHREE BAHUBALI STOCK BROKING LIMITED
12, India Exchange Place, 3rd Floor, Kolkata-700 001
DP ID IN 300773

Date									
	D	D	M	M	Y	Y	Y	Y	Y

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. Client ID (of account to be closed)

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4. Please tick 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]	<input type="checkbox"/> Transfer to my/our own account <i>(Provide target account details and enclose Client Master Report of Target Account)</i>	Target Account Details							
	<input type="checkbox"/> Transfer to any other account <i>(Submit duly filled Delivery Instruction Slip signed by all holders)</i>	<input type="checkbox"/> NSDL	DP ID						
		<input type="checkbox"/> CDSL	Client ID						
<input type="checkbox"/> Option C [Rematerialise/Reconvert <i>(Submit duly filled Remat/Reconversion Request Form-for mutual fund units)</i>]									

5. 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 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									Client ID <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								
Name of Sole/First Holder																	
Name of Second Holder																	
Name of Third Holder																	
Signature of the Authorised Signatory Date	Seal/Stamp of Participant																