

ANNEXURE Q

APPLICATION FOR CLOSING AN ACCOUNT

(For Beneficiary Account only)



Dayco Securities Pvt Ltd.

Regd. Off. : 7, Lyons Range, Kolkata - 700 001, Phone : 2231 3452, 2230 2066
 Corp. Off. : Poddar Point, 'B' Block, 7th Floor, 113, Park Street, Kolkata - 700 016
 Ph. : 40675066, 5074, 5075 • Fax : 91-33-2226-7538
 e-mail : contact@daycoindia.com, website : http://www.daycoindia.com

DP id : IN 300 263

Date	D	D	M	M	Y	Y	Y	Y
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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 tic 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 <input type="checkbox"/> CDSL	DP ID Client ID					
<input type="checkbox"/> Option C [Rematerialise / Reconvert (Submit duly filled Remat / Reconversion Request Form - for mutual fund units)]								

5. Signature(s)

Sole / First Holder	<input checked="" type="checkbox"/>
Second Holder	
Third Holder	

Acknowledgement

We hereby acknowledge the receipt of the your request for closing for 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	Seal /Stamp of Participant		