

For Trading and DP Accounts

To,  
SHAREKHAN LIMITED

Date	D	D	M	M	Y	Y	Y	Y
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**Registered Office Address :** The Ruby, 18th Floor, 29 Senapati Bapat Marg, Dadar (West), Mumbai – 400 028, Maharashtra, INDIA Tel: 022 - 6750 2000 I Fax: 022 - 2432 7343 I Website: <https://www.sharekhan.com>

**Correspondence Office Address :** 10th Floor, Gigaplex Bldg. No. 9, Raheja Mindspace, Airoli Knowledge Park Rd, MSEB Staff Colony, TTC Industrial Area, Airoli, Navi Mumbai, Maharashtra 400708, India. Tel: 022 - 61169000/ 61150000; Fax no. 61169699 • DP ID IN300513 • DP SEBI REG. NO. IN-DP-365-2018 • For inquires & queries email at [dpcall@sharekhan.com](mailto:dpcall@sharekhan.com)

- I/We hereby request you to close my/our Trading account with you : \_\_\_\_\_
- All Segment  Equity / Currency Derivative / F&O
- I/We hereby request you to close my/our DP account with you:

We undertake to indemnify and reimburse Sharekhan for any losses/cost which the company may incur on account of our transactions and it will be fully binding on my/our heirs/nominees.

Name of the holder(s)	
Sole/First Holder	
Second Holder	
Third Holder	

4. Reason/s for Closure of depository account \_\_\_\_\_

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

	Sole/First Holder	Second Holder	Third Holder
6. Signature(s)			

For Office Use :

Scrutinizer : \_\_\_\_\_

Maker : \_\_\_\_\_

Checker : \_\_\_\_\_

BRANCH STAMP
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HO STAMP
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Signature of the Authorised Signatory

Seal/ Stamp of Participant

Date

Note : Please do submit Separate application for Product Deactivation

In case of any clarification, feel free to contact your branch/relationship manager or call on 022-25753200 / 022-61151111 , 022-33054600 / write to us at [igc@sharekhan.com](mailto:igc@sharekhan.com)  
Compliance Officer - Ms. Binkle R. Oza - Email [complianceofficer@sharekhan.com](mailto:complianceofficer@sharekhan.com) Contact No. 022-62263303