CELEBRATING YOUR MONEY GROWTH

Account Closure Request Form

(To be filled by the trading account holder. Please fill all the details in **Block Letters** in English)

Trading Account No.

Closure Initiated by **Account Holder** ☐ **Trading Member** ☐

Date

Client Name

Address

Pin

Dear Sir / Madam,

I / We request you to close my / our account with you from the date of this application. The details of my/our account are given below:

Reasons for Closing the Account

Name	**First Authorized Signatory**
Signature	

If Trading Member initiates account closure, Signature(s) of account holder(s) not required. Senior official of TM should sign the form in case Trading Member initiates closure.

Please tear here

Acknowledgement Receipt

Date

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

Trading ID NO.

Name of client

For Office Use Only)

Employee Name	
Employee Code	
Designation	
Signature & Stamp	