Share India
You generate, we multiply

Account Closure Form

Share India Securities Ltd
A-15, Sector -64,
Noida, Uttar Pradesh-201301

☐ **Trading Account Only** ☐ **Demat Account Only** ☐ **Both Demat & Trading Account**

Application No.		**Date**								
Closure Initiated by	☐ **BO** ☐ **DP** ☐ **CDSL**									

(Please fill all the details in **Block Letters** in English)

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 TRADING CODE----------

DP ID	**1**	**2**	**0**	**3**	**8**	**0**	**0**	**0**	**Client ID**	**0**	**0**						
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:	
○ Partly rematerialised and partly transferred.	○ Rematerialised
○ Transferred to another Account (Number given below)	○ Not applicable

DP ID									**Client ID**								
Balance present in a/c for (To be4 filled by **DP,** if applicable)									Θ Ear – marked Θ Pending for Dematerialisation Θ Pending for Rematerialisation					Θ Pledged Θ Frozen Θ 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			

*****If DP or CDSL initiates account closure, Signature(s) of account holder(s) not required.

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Acknowledgement Receipt

Application No. **Date: -**

We hereby acknowledge the receipt of the you is instruction for closing the following Account subject to verification: -

DP ID	**1**	**2**	**0**	**3**	**8**	**0**	**0**	**0**	**Client ID**								
Name of the First/ Sole Holder																	
Name of the Second Holder																	
Name of the Third Holder																	
Reason for Closure																	

Depository Participants Seal & Signature

Instructions to Account Holder(s)

- Submit a duly filled up RRF if the balances are to be rematerialized.
- Submit a duly filled Delivery Instruction Slip (DIS) (off market instruction slip) if the balances are to be transferred to another A/c. This requirement is not applicable in the case of " SHIFTING OF ACCOUNT."