



Canara Bank Securities Ltd

A WHOLLY OWNED SUBSIDIARY OF CANARA BANK

Canara Bank Securities Ltd. (DP ID : IN301356)
Central DP Cell, 1st Floor, No. 51, Stock Exchange Towers,
1st cross, JC Road, Bangalore, Karnataka, 560027.
Contact: 080-22271211/22105148

ANNEXURE Q

APPLICATION FOR CLOSING AN ACCOUNT (For Beneficiary Account only)

To,

DP Name: Canara Bank Securities Ltd,

DP Address: No. 51, Stock Exchange Towers,

1st cross, JC Road, Bangalore -560027

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. Demat Client ID (of account to be closed) _____

4. Trading Account No. (of account to be closed) _____

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]	Transfer to my / our own account <i>(Provide target account details and enclose Client Master Report of Target Account)</i> Transfer to any other account <i>(Submit duly filled Delivery Instruction Slip signed by all holders along with Beneficiary form)</i>																								
	<table border="1"> <tr> <th colspan="2">Target Account Details</th> </tr> <tr> <td> <input type="checkbox"/> NSDL <input type="checkbox"/> CDSL </td> <td> <table border="1"> <tr> <td>DP ID</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr> <td>Client ID</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> </td> </tr> </table>	Target Account Details		<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL	<table border="1"> <tr> <td>DP ID</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr> <td>Client ID</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>	DP ID										Client ID									
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<input type="checkbox"/> Option C [Rematerialize / Reconvert (Submit duly filled Remat / Reconversion Request Form-for mutual fund units)]																									

6. Signature(s)

Sole / First Holder	
Second Holder	
Third Holder	

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Acknowledgement									
We hereby acknowledge the receipt of the your request for closing the following Account subject to verification:									
DP ID	<table border="1"> <tr> <td>I</td><td>N</td><td>3</td><td>0</td><td>1</td><td>3</td><td>5</td><td>6</td> </tr> </table>	I	N	3	0	1	3	5	6
I	N	3	0	1	3	5	6		
	Client ID								
Name of Sole / First Holder									
Name of Second Holder									
Name of Third Holder									
Signature of the Authorised Signatory	Seal/ Stamp of Participant								
Date									