



### Account Closure Request Form (CDSL)

Application No.		Date	
Closure Initiated by	BO	DP	CDSL

(To be filled by the BO (in case of BO initiated closure). Please fill all the details in **BLOCK LETTERS** in English)

To,  
 Eureka Stock & Share Broking Services Ltd  
 1101, Merlin Infinite, DN-51, Sector-V,  
 Salt Lake City  
 Kolkata 700 091  
 DP ID: 12055800

Dear Sir / Madam,

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:

<b>Account Holder's Details</b>																	
DP ID	1	2	0	5	5	8	0	0	Client ID								
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 :																	
1 Partly rematerialized and partly transferred.									2 Rematerialized								
3 Transferred to another account (Number given below)									4 Not Applicable								
DP ID									Client ID								
Balance present in account for									Ear - marked			Pledged			Frozen		
(To be filled by DP, if applicable)									Pending for Demat			Pending for Remat			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.

------(Please Tear Here)-----

**Acknowledgment Receipt**

**Application No.**

**Date:-**

We hereby acknowledge the receipt of your instruction for closing the following account subject to verification:-

DP ID	1	2	0	5	5	8	0	0	Client ID								
Name of the First / Sole Holder																	
Name of the Second Holder																	
Name of the Third Holder																	
Reason for Clousre																	

**Instructions:** 1 Submit a duly filled RRF if the balances are to be rematerialized.  
 2 Submit a duly filled DIS (off market instruction slip) if the balances are to be transferred to another account. (Not applicable in "Shifting of Account".)

**Depository Participant Seal and Signature**