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Trading and Demat Account Closure Form

Date	D	D	M	M	Y	Y	Y	Y

To,

Standard Chartered Bank and Standard Chartered Securities (India) Limited
2nd Floor, 23-25, M. G. Road, Fort, Mumbai 400001, Maharashtra, India

CLOSURE REQUEST FOR- ◎ Only Trading A/c ◎ Only Demat a/c ◎ Both

Dear Sir/ Madam,

1) I / We hereby request you to close my/our account with you as per following details:

Depository: ◎ **NSDL- IN300100/ IN300360/ IN300335** ◎ **CDSL- 12015800**
(DETAILS OF ACCOUNT TO BE CLOSED)
DP ID: Client ID: Trading Account Code:
Name of First/Sole Holder-
Name of Second Holder-
Name of Third Holder-

Address for Correspondence- _____

2) Reason/s for Closure of Trading/ depository account: _____

3) *DETAILS OF REMAINING BALANCES IN THE ACCOUNT (IF ANY) [(*Please tick the applicable option (s)]:

Option A- There are no balances / holdings in the account
Option B- Transfer the balances / holdings in this account as per below details-
O- Transfer to my / own account (Provide target account details & enclose Client Master Report of Target Account)
O- Transfer to any other account (Submit duly filled Delivery Instruction Slip signed by all holders)

Target Account Details:	NSDL ◎	CDSL ◎
DP ID:	Client ID:	

Bank Account Details:

Bank Name & Address with Pin Code: _____

Bank Account Number:		Account Type: ◎ Savings ◎ Current
MICR Number:	IFSC Code:	

Option C- [Rematerialize / Reconvert (Submit duly filled Remat/ Conversion Request Form for mutual fund units)]

Notes:

1) The client should unmark the lien on funds and securities created in favour of Standard Chartered Securities (India) Limited before applying for closure of the Trading Account.
2) Submit a duly filled RRF if the balance is to be rematerialized.
3) Submit a duly filled Delivery Instruction Slip (DIS) (off market instruction slip) if the balances are to be transferred to another Account.
4) This requirement is not applicable in the case of “SHIFTING OF ACCOUNT”

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I/We declare and confirm that all the transactions in my/ our trading and demat account are true/ authentic. I undertake to indemnify and keep you indemnified against all losses, claims, damages, demands, charges and proceedings, incurred or suffered by you in consequence of my failure to perform any of my obligations as laid down in rights and obligations of stockbrokers, sub-brokers and clients as prescribed by SEBI and Stock Exchanges and to provide all necessary information & co-operation if required even after the closure of my trading account. Further please note that the Power of Attorney (POA) given to SCSI for operating the Demat Account No._____ and Bank Account No. _____ both held with Standard Chartered Bank stands revoked on closure of the trading account."

	First Holder	Second Holder	Third Holder
Name of Account Holder			
Signature			

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

For Office Use only	**Demat Staff**	**Trading Staff**
Scrutiny By Name EMP Code		
Data Entered by		
Verified by		
Reference No.		
Branch Stamp		
Head Office Stamp		

Acknowledgement

We hereby acknowledge the receipt of your request for closing the following Account subject to verification:
Name of Account Holder: _____ **Trading Account Code**: _____
Name of Receiving Official: _____

Signature of Receiving Official: **Stamp and Date:**