

Form -CM-25

Trading A/c Closure

To,
Manager Compliance,
Raghunandan Industries (P) Ltd/ Raghunandan Capital (P) Ltd
26/257 B, Sultanganj,
Near Ashish Palace,
Agra -282004.

Sub: Closure of Trading Code _____

Dear Sir/Madam,

I am having a debit / credit balance of Rs _____ lying with you as on _____ .

I am enclosing herewith the cheque no. _____ Of Rs. _____ dated _____
drawn on _____ Bank or request you to kindly issue me the cheque against
the credit balance in my account and close my trading account no. _____.

I also understand that you shall debit the cost of facilities (if applicable), i.e. diet Odin charges / connectivity charges etc provided to me (if not debited earlier) till the date of closure of the account. I also confirm that I have received all the contract notes, margin statements and account statements till date and there shall be no dues pending against you after the realization of the above said final settlement cheque issued by you.

Thanking You,

Client Code _____ Segment _____

Name of the Client _____

(Signature of the Client) _____

Date :

- Kindly attach self attested copy of your ledger with request

Account Closure Request Form

Application No.		Date	D	D	M	M	Y	Y	Y	Y	
Closure Initiated by	<input type="checkbox"/> BO	<input type="checkbox"/> DP	<input type="checkbox"/> CDSL								

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

To,
Depository Participant Name
Address

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:

Account Holder's Details																				
DP ID											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 :																				
<input type="checkbox"/> partly rematerialised and partly transferred.											<input type="checkbox"/> Rematerialised									
<input type="checkbox"/> Transferred to another account (Number given below)											<input type="checkbox"/> Not applicable									
DP ID											Client ID									
Balance present in account for (To be filled by DP, if applicable)											<input type="checkbox"/> Ear - marked					<input type="checkbox"/> Pledged				
											<input type="checkbox"/> Pending for Dematerialisation					<input type="checkbox"/> Frozen				
											<input type="checkbox"/> Pending for Rematerialisation					<input type="checkbox"/> 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 Hear)=====

Acknowledgement Receipt

Application No.

Date :-

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

DP ID											Client ID									
Name of the First / Sole Holder																				
Name of the Second Holder																				
Name of the Third Holder																				
Reason for Closure																				

Depository Participant Seal and Signature

Instructions to Account Holder(s)

- Submit a duly-filled 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 Account. This requirement is not applicable in the case of "SHIFTING OF ACCOUNT".