

**APPLICATION FOR CLOSING AN ACCOUNT
(For Beneficiary Account only)**

To,
DAULAT SECURITIES LTD.
86 CANNING STREET , KOLKATA- 700001
DP ID : IN301372

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. Client ID (of account to be closed)

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4. 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]	<input type="checkbox"/> Transfer to my / our own account <i>(Provide target account details and enclose Client Master Report of Target Account)</i>																												
	<input type="checkbox"/> Transfer to any other account <i>(Submit duly filled Delivery Instruction Slip signed by all holders)</i>																												
	<table border="1"> <tr> <th colspan="10">Target Account Details</th> </tr> <tr> <td rowspan="2"> <input type="checkbox"/> NSDL <input type="checkbox"/> CDSL </td> <td>DP ID</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> </tr> </table>	Target Account Details										<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL	DP ID									Client ID							
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<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL	DP ID																												
	Client ID																												
<input type="checkbox"/> Option C [Rematerialise / Reconvert (<i>Submit duly filled Remat / Reconversion Request Form-for mutual fund units</i>)]																													

5 Signature(s)

Sole / First Holder	
Second Holder	
Third Holder	