COMPOSITE INVESTMENTS PVT LTD.
No. 30/1, 3rd FLOOR, S.J.TOWERS, MISSION ROAD, BANGALORE – 560027.

Account Closure Request Form

☐ **Trading**   ☐ **Demat**   ☐ **Both Trading and Demat**

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

Application No.						Date								
Closure Initiated by	☐ BO	☐ DP		☐ CDSL										

Trading Code	

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:

Demat Account details:

DP ID	1	2	0	6	5	2	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:
☐ Partly rematerialised and partly transferred.   ☐ Rematerialised
☐ Transferred to another account (Number given below)   ☐ Not applicable

DP ID								Client ID							

Balance present in a/c for (To be filled by DP, if applicable)	☐ Ear - marked ☐ Pledged ☐ Pending for Dematerialisation ☐ Frozen ☐ Pending for Rematerialisation ☐ Lock-in

> **DECLARATION:- In case of Account Closure due to SHIFTING OF ACCOUNTS:**
> **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 the receipt of your instruction for Closing the following Account subject to verification:

DP ID – 12065200	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**".