Commodity Account Closure Form

Date:

To,
PROFITMART
Office No. 12, 2nd Floor,
Neelkanth Market, M.G. Road,
Ghatkopar –East, Mumbai-400077

Dear Sir / Madam,

I/We …….. Hereby would like to close my/our above mentioned account held with your organization. Kindly remit my balance amount, if any as full and final settlement after the recovery of dues if any towards me.

Trading Code								

Please do the needful at the earliest and arrange to refund the balance (if any) in the said Trading

account. Closure Reason: _____

I agree with the Ledger balance And/ Or Stock lying in my trading code and Demat account as on the said date and have no dispute with respect to the said accounts

Thanking you,

Client Name

Signature

DP Account Closure Form

Date : ____/____/_____

To,
PROFITMART
Office No. 12, 2nd Floor,
Neelkanth Market, M.G. Road,
Ghatkopar –East, Mumbai-400077

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	1	2	0	8	3	6	0	0	Client ID								

TRADING CODE																	
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) : (Please attach the annexure)

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 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 the receipt of the 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 dully-filled up RRF if the balances are to be rematerialized.
- Submit a duly filled up transfer form (off market instruction slip) if the balances are to be transferred to another A/c.
- I agree with the Ledger balance And/ Or Stock lying in my trading code and Demat account as on the said date and have no dispute with respect to the said accounts

Trading Account Closure Form

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Closure Reason: _____

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Thanking you,

Client Name

Signature