

Form 34

APPLICATION FOR CLOSING AN ACCOUNT (For Beneficiary Account only)

To, DP Name: IL&FS Se	curities Services Limited	•	Da	ite I	D D	М	М У	Y	Y	Y
DP Address: IL&FS House, Plot No 14, Raheja Vihar, Chandivali, Andheri East, Mumbai 400 072 DP ID: IN300095 / IN302871 / IN303446										
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:										
, Fy										
3. Client ID (of account to	be closed)									
4. Please tick the applicable option(s)										
Option A [There are no balances / holdings in this account]										
Option B										
Transfer the accou	Target Account Details									
balances / (Provi		DP ID							Г	
this account Repor	☐ NSDL		Н		+				⊢	
as per details Trans given] (Subn	□ _{CDSL}	Client							l	
Instru	— CD3L	עוו								
holders) Option C [Rematerialise / Reconvert (Submit duly filled Remat / Reconversion Request Form-for mutual fund units)]										
5. Signature(s)										
Sole / First Holder										
Second Holder										
Third Holder										
		Acknowledge								
-	ne receipt of your request for	_	wing Acco	unt sul	ject to	verifica	tion:			
DP ID		Client ID								
Name of Sole / First Holder										
Name of Second Holder										
Name of Third Holder										
Signature of the Authorised Signatory					Seal/ Stamp of Participant					
Date										