

ANNEXURE Q
APPLICATION FOR CLOSING AN ACCOUNT

Date

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To,
GOLDMINE STOCKS PVT LTD

P05-01D, P05-01E, 5th Floor, Tower A,
WTC Gift City, Road 5E, Zone 5, Gift City,
Gandhinagar - 382355

DP ID-IN301645 / TM ID -NSE - 08846 BSE - 3020 MCX - 12760

For Beneficiary Account only

I/We hereby request you to close my/our account with you as per following details:

Name of the holder(s)											
Client ID (of account to be closed)										UCC (of account to be closed)	
Name of Holders								Signatures			
Sole/First Holder											
Second Holder											
Third Holder											

Reason/s for Closure of depository: _____
Please tick the applicable option(s)

I/ We request you to close the Trading Account

<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 (Refer **Note1)	Target Account Details												
	<input type="checkbox"/> Transfer to any other account (Refer **Note2)	<input type="checkbox"/> NSDL	DP ID	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>										
	<input type="checkbox"/> CDSL	Client ID	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>											
<input type="checkbox"/> Option C (Rematerialise/Reconvert(Submit duly filled Remat/Reconversion Request Form for mutual fund units))														

****Note 1: Provide target account details and enclose client master report of target account**
****Note 2: Submit duly filled Delivery Instruction Slip signed by all holders**

For Office Use Only	
Account Opening Date	
Account Closing Date	
Deposit	
Pending Dues	
Credit Balance	
Total Amount to be Paid	

CID -

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Documents to be submitted: Proof of Identity of all holders with signature

Acknowledgment

GOLDMINE STOCKS PVT LTD

P05-01D, P05-01E, 5th Floor, Tower A, WTC Gift City, Road 5E, Zone 5, Gift City, Gandhinagar - 382355

Received the application from _____ the sole/first holder along with

&

As the second & third holder respectively for closing of a depository account. Your Account will be closed shortly after verification & same will be intimated to you.
DATE : _____

Participant's Stamp & Sign