

Account Closure Request Form – Trading Account

Application No.	Date DDMMYY
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(To be filled by the BO (in case of BO-initiated closure). Please fill all the details in **Block Letters** in English)

To,
Hotline Capital Services Pvt. Ltd.
302, 3rd. Floor , 5 Pusa Road, Karol Bagh
New Delhi 110005
SEBI Regn No: INZ000288933

Dear Sir / Madam,

I / We the Trading Account Holder/ Sole Holder / Joint Holders / Guardian (in case of Minor) / Clearing Member request you to close my / our **Trading** account with you from the date of this application. The details of my/our account are given below:

<input type="checkbox"/> Trading Account		
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(Please Tick in appropriate Column)

1.	Account Holder's Details		
	Name of the First / Sole Holder		
	Name of the Second Holder		
	Name of the Third Holder		
	Address for Correspondence		
	City:	State:	Pin:
2.	Reasons for Closing the Account		
3.	Trading Account Code to be closed		
	Trading Account Name		
	Signatures:		Sign Verified (For Office Use Only) Tick Status
	Trading Account /Sole/First Holder	Yes / No	Trading Suspended : Yes / No Ledger Balance : Debit / Credit / Nil Pledged Securities : Yes / No Checked By : _____
	Second Holder	Yes / No	
	Third Holder	Yes / No	

Acknowledgment

We hereby acknowledge the receipt of your request for closing the following Account subject to verification:

Name of Sole/First Holder	
Name of Second Holder	
Name of Third Holder	
Trading Account Code	
Trading Account Name	
Date	Signature of the Authorised Signatory
	Seal / Stamp of Participant

