

ACCOUNT CLOSURE REQUEST FORM

Date:-

To,
SHILPA STOCK BROKER PVT LTD
Nat war Chamber, 1ST Floor,
94, Nagindas Master Road,
Fort, Mumbai-400 001.

Dear Sir,

I/We the sole Holder of the trading account request you to close my/our account with you from the date of application. The details of my/our account are given below.

NAME OF CLIENT: - _____

TRADING CODE: - _____

BRANCH NAME: - _____

SUB-BROKER NAME: - _____

SEGMENTS FOR CLOUSER BSE / NSE CASH / NSE FO & FX

SIGNATURE OF CLIENT

SUB-BROKER SIGNATURE