

Account Closure Request Form (MCX)

To,

RAYALSEEMA BULLION & COMMTRADE PVT LTD

38/5, Flat No 1-B, 1st Floor,
TVS Appt, Venkatnarayana Road,
T.nagar, Chennai – 17.
Tel : 044 – 33 120 120

Date:

Dear Sir,

I/We the holder of the below mentioned trading account, request you to close my/our account with Rayalseema Bullion & Comtrades Pvt Ltd., from the date of this application. The details of my/our account are given below.

Name of the Client :

Trading Client Code :

Branch Name :

Sub-Broker Code :

Reasons for closing the account : Service Issues Shifting because of better Brokerage Others

IF ANY OTHER REASONS

Signature of the Client

Branch manager Signature

HO verified Signature



For Office Use Only :

| Checker Person | Authorize Person | Status |
|--|--|------------------------------------|
| Name : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="Y"/> <input type="text" value="Y"/> | Name : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="Y"/> <input type="text" value="Y"/> | Ledger Balance : |
| Date : | Date : | Open Position : |
| Signature : | Signature : | Cr Pay out : Chq/RTGS Ref No. |
| | | Dr Pay in : Chq/RTGS Ref No. |

Acknowledgement Receipt

Date :

Name of the Client :

Trading Client Code :

Branch Name :

Sub-Broker Name :

Trading account will be closed within 7 days, after receiving the account closure request. Subject to the realization of Cheque/DD, if there is a debit balance.

For **Rayalseema Bullion & Comtrade Pvt Ltd**

HO Employee Code :

Date

Place :