



**APPLICATION FOR CLOSING AN ACCOUNT ( ANNEXURE Q )  
(For Beneficiary Account only)**

To  
**M/s. Navia Markets Limited**  
**DP ID : IN 300378**  
 Ganga Griha, 4<sup>th</sup> & 5<sup>th</sup> Floor  
 No.9, Nungambakkam High Road  
 Chennai- 600034.

Date 

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**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:** \_\_\_\_\_

**3. Client ID (of account to be closed)**

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**4. Please tick the applicable option(s)**

<input type="checkbox"/> <b>Option A</b> [There are no balances / holdings in this account ]																																	
<input type="checkbox"/> <b>Option B</b> [Transfer the balances / holdings in this account as per details given]	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; vertical-align: top;"> <input type="checkbox"/> Transfer to my / our own account  <i>(Provide target account details and enclose Client Master Report of Target Account)</i> </td> <td colspan="2" style="text-align: center;"><b>Target Account Details</b></td> </tr> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Transfer to any other account  <i>(Submit duly filled Delivery Instruction Slip signed by all holders)</i> </td> <td style="width: 10%; text-align: center;">DP ID</td> <td style="width: 50%;"><table border="1" style="width: 100%; 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></td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/> NSDL</td> <td style="text-align: center;">Client ID</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/> CDSL</td> <td style="text-align: center;"><table border="1" style="width: 100%; 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></td> </tr> </table>	<input type="checkbox"/> Transfer to my / our own account <i>(Provide target account details and enclose Client Master Report of Target Account)</i>	<b>Target Account Details</b>		<input type="checkbox"/> Transfer to any other account <i>(Submit duly filled Delivery Instruction Slip signed by all holders)</i>	DP ID	<table border="1" style="width: 100%; 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"/> NSDL	Client ID		<input type="checkbox"/> CDSL	<table border="1" style="width: 100%; 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>										
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<input type="checkbox"/> <b>Option C</b> [Rematerialise / Reconvert (Submit duly filled Remat / Reconversion Request Form-for mutual fund units)]																																	

**5. Signature(s)**

Sole / First Holder	
Second Holder	
Third Holder	

**Acknowledgement**

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

<b>DP ID</b>	<b>Client ID</b>																				
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Name of Sole / First Holder																					
Name of Second Holder																					
Name of Third Holder																					
<b>Signature of the Authorised Signatory</b>	<b>Seal/ Stamp of Participant</b>																				
<b>Date</b>																					

