



MARWADI SHARES AND FINANCE LTD.
"Marwadi Financial Plaza", Nana Mava Main Road,
Off 150 feet Ring Road, Rajkot -360001.

www.marwadionline.com

Phone.-0281-2332001

Application for transfer of shares under
ACCOUNT CLOSURE CUM TRANSFER (NON-LEVY) Scheme

Date: ___/___/20___

To,
The manager – Demat Department,
Marwadi Shares & Finance Limited,
Rajkot

Dear Sir,

I/We am holding Demat Client Id _____ with your
NSDL/CDSL DP having DP ID IN300974 / 12035100 .

I want to transfer my above shares into my other DP A/C under
A/C closer cum transfer scheme. I hereby attached the following
document of your reference.

- Latest Client Master Report of Target Client Id in "CRYSTAL FORMAT"
(Provided by NSDL/CDSL) duly stamped and Signed by Target DP.
*Note:- (Back office Client Master Report will not be accepted in any
circumstances).*
- Demat Account Closure Form.
- DIS Cancellation & Demat A/C Freeze / Suspend letter.

Kindly transfer all my holding to target Beneficial DP ID and Client
Id and obliged.

Thanking You.

X _____ X _____ X _____



MARWADI SHARES AND FINANCE LTD.
"Marwadi Financial Plaza", Nana Mava Main Road,
Off 150 feet Ring Road, Rajkot -360001.

www.marwadionline.com

Phone.-0281-2332001

Date : ___/___/20___

To,
The manager – Demat Department,
Marwadi Shares & Finance Ltd.,
Rajkot

SUB: Freeze/Suspend of Demat Account / DIS book(s).

Sir,

I/we am having Demat Client Id _____ with your DP having
DP ID IN300974 / 12035100.

Please find here with A/C closure cum transfer application to
transfer my mentioned account to other A/c having same pattern in
other DP.

But due to unavoidable reasons, some of the scripts is/are not
transferrable. You are therefore requested to suspend/freeze my
A/C with your DP.

You are also requested to cancel/suspend my entire remaining DIS
Book, as per rules & regulation. Do the needful at your end.

Thanking You.

X _____ X _____ X _____



Annexure - Q - Applicatin For Closing an Account (NSDL-IN300974)
Annexure -10.1 - Account Closure Request Form (CDSL-12035100)

MARWADI SHARES AND FINANCE LTD.
"Marwadi Finacial Plaza", Nana Mava Main Road, Off 150ft Ring Road, Rajkot - 360001
Phone :- (0281) 2332001, 2332007 Fax :- (0281) 2331241

Sr. No. Closure Initiated by : BO DP Depository (NSDL/CDSL)

(To be filled by the BO (in case of BO-initiated closure). Please fill all the details in **Block Letters** in English)

To,
Marwadi Shares & Finance Ltd.
RAJKOT - 360001.

Date :- / /20

Dear Sir / Madam,

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

1 Account Holder's Detail	DP ID									Client ID									
Name of Sole / First Holder																			
Name of Second Holder																			
Name of Third Holder																			
Address for Correspondence																			
		City :					State :					PIN							
2 Reason for Closure of Account :-																			
3 Please tick the applicable option(s)																			
<input type="checkbox"/> Option A		There are no balances / holding 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 (Provide target account details and enclose Client Master Report of Target Account)			Target Account Details :-					<input type="checkbox"/> NSDL		<input type="checkbox"/> CDSL							
					DP ID														
					Client ID														
<input type="checkbox"/> Option C		Transfer to any other account (Submit duly filled Delivery Instruction Slip signed by all holders)																	
<input type="checkbox"/> Option D		Rematerialise / Reconvert (Submit duly filled Remat / Reconversion Request Form-for mutual fund units)																	
		Balance present in account for (To be filled by DP, if applicable) (Only for CDSL DP)																	
		<input type="checkbox"/> Pending for Dematerialisation					<input type="checkbox"/> Ear- Marked					<input type="checkbox"/> Lock-in							
		<input type="checkbox"/> Pending for Rematerialisation					<input type="checkbox"/> Frozen					<input type="checkbox"/> Pledged							
4 How Do YOU rate our Services & Charges		Services →		<input type="checkbox"/> Excellent		<input type="checkbox"/> Good		<input type="checkbox"/> Satisfactory		<input type="checkbox"/> Bad									
		Charges →		<input type="checkbox"/> Low		<input type="checkbox"/> Mderate		<input type="checkbox"/> High		<input type="checkbox"/> Very High									
Any Suggestion :-																			

DECLARATION : In case of Account Closure due to **Closure Cum Transfer(NSDL)/Shifting of Account (CDSL)**
I / We declare and confirm that all the transactions in my/our demat account are true/authentic

Signature of Sole/First Holder	Signature of Second Holder	Signature of Third Holder
--------------------------------	----------------------------	---------------------------

★ Clients are requested to fill all the above 4 Details with date (mentioned above) along with signature(s)
★ If DP or Depository (NSDL/CDSL) initiates account closure, Signature(s) of account holder(S) not required.

Received By - Date & Time - Branch Name -	Bill Amount	Payment Recd. (Amt)	Discount (if Any)	Authorised Signatory	Verified by Date of Rec.	Closed By
	Bill Date					

Sr. No. **Acknowledgement**

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

DP ID	IN300974 / 12035100	Client ID								
Name of Sole/First Holder			Name of Second Holder			Name of Third Holder				
Reason for Closure of Account :-										
Received By :			Branch Name :			Date : / /20		For, MSFL (Authorised Signatory)		

Version : 01012016

Version : 01012016