

Date :

To

M/s. _____

DP : CDSL / NSDL

DP ID : _____

Sir,

Sub: Shifting of Account – Reg.

Ref: My BO Account with you , BOID : _____.

I have Beneficiary Account with you and my BOID is _____.

Now I would like to shift my BO account to M/s. _____,

DPID : _____ under the reason “***Non Levy of Charges for Transfer of Holdings consequent to closure of closure***”.

I am herewith enclosing the Client Master Report (CMR), Delivery Instruction Slip(s), Account Closure Form & Self attested copy of _____ as proof of Identity for you information and records.

I request you to process the same at the earliest.

Thanking you sir,

Name :

Signature :

Encl. A/a.