Regd. Office: T.C. 28/2023, Capstocks Towers, Thakaraparambu Road, Fort P.O, Trivandrum - 695 023 Ph: 2463735, 2461745 Fax: 2461946, email: capstock@vsnl.com



Trading Account Closure Form

Application No.				Date								
Closure Initiated by		Client		□ Capstocks				□ NSE/BSE				
(To be filled by the clinet. Please fill all the details in Block Letters in English)												
To,												
Capstocks & Securities (Thakaraparambu Road,	India) Pvt. Ltd. Frivandrum.	•										
Dear Sir,												
I request you to close my	y Trading accou	ınt with you .	The details	of my a	accoun	t is give	en bel	ow:				
Client Details												
Trading Code			Branch									
Name of the Client												
Address												
City			State			PIN						
Reasons for Closing the Account												
Balance remaining in the account (if any)			•	Dr		Cr			lil			
Signature												
2-8												
		(Please	Геаr Here)									
		`	,									
Acknowledgement Receipt Application No. Date:-												
**												
We hereby acknowledge	the receipt of the	your instruction	n for Closin	g the foll	owing A	Account	subjec	ct to v	erifica	atio	n:-	
Trading Code			Branch									
Name of the Client												
Reason for Closure												

Authorised Signatory

Note: Account will be closed only after clearing all dues with us.