JHP SECURITIES PVT.LTD.

201, Dev Neo Vikram, Sahakar Nagar C.H.S., New Link Road, Above Audi Car Showroom, Andheri (W) Mumbai - 400 053
Ph No.: 022-69699902 / 905 Fax No.: 022-69699900 Email Id- ig@jhpsecurities.com

Account Closure Request Form

Application N	lo.									Date		D	D	M	M	Y		Y	Y	Y
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*If DP or CDSL initiates account closure, Signature(s) of account holder(s) not required.

Depository Participant Seal and Signature