



(ANEX:20)

A Subsidiary Of Century Commerical Bank Limited

RELATED TO BYLAWS-27

ACCOUNT CLOSE FORM (INDIVIDUAL)

DATE:

FORM NO:-
ACCOUNT CLOSE (INDIVIDUAL)

From Bo Id:-

| Citizenship: - | Issue District | Number | Issue Year |
|-----------------------|-----------------------|---------------|-------------------|
| | | | |

Name:-
Father Name: -
Mother Name: -
Spouse Name: -
Grand Father Name: -
TELEPHONE: -
ADRESS: -
EMAIL: -
Date OfBirth: -

| DD | MM | YYYY |
|-----------|-----------|-------------|
| | | |

I HEREBY CONFIRM TO CLOSE MY DEMAT ACCOUNT FROM THIS CAPITAL...

APPLICANT SIGNATURE:

Prepared/Approved by

.....
(DP DEPART)

To

Date:-

Century Capital Markets Limited

4thFloor,Arya Tara Business Complex ,Kamaladi,Ktm

Subject:Demat Account Close

Dear Sir/Madam,

I have open demat account in this Capital/Century Commerical Bank Branch.....

my demat account number is (13016000-.....) So I/We Hereby request you to close my/our account with you as per following details.

Reasons for closing the Demat Account (Please tick the reasons for closing the Demat Account)

| | | |
|------------|--------------------------|---|
| Option "A" | <input type="checkbox"/> | There are no balances/holding in this account |
| Option "B" | <input type="checkbox"/> | Transfer to another account |
| Option "C" | <input type="checkbox"/> | More than two account |
| Option "D" | <input type="checkbox"/> | Unsatisfactory service |
| Option "E" | <input type="checkbox"/> | High charge |
| Option "F" | <input type="checkbox"/> | Other(Pleasespecif):- |

Also,I have attached a necessary documents..

- 1.Photocopy of citizenship
- 2.Form to close account i.e,(anusuchi 20)
- 3.Deposit slip of annual fee
- 4.Remaining DIS

Applicant,

Accontholder signature:.....

Accontholder name:.....

Mobile number:.....

For Official Only

Application Received on:-

Account Closed on:-