



FORM 34

APPLICATION FOR CLOSING AN ACCOUNT (For Beneficiary Account only)

IDFC First Bank Limited, Naman Chambers, C-32, G Block, Bandra-Kurla Complex, Bandra East, Mumbai 400 051.



DP ID IN304203

Date DD MM YYYY

1 I/We hereby request you to close my/our account with you as per following details:

NAME OF THE HOLDER(S)

Sole/First Holder

Second Holder

Third Holder

2 Reason/s for Closure of depository account:

3 Client ID (of account to be closed)

4 Please tick the applicable option(s)

☐ Option A (There are no balances/holdings in this account)

☐ Option B (Transfer the balances/holdings in this account as per details given)

☐ Transfer to my/our own account (Provide target account details and enclose Client Master Report of Target Account)

☐ Transfer to any other account (Submit duly filled Delivery Instruction Slip signed by all holders)

Target Account Details

☐ NSDL ☐ CDSL DP ID

Client ID

☐ Option C [Rematerialise/Reconvert (Submit duly filled Remat/Reconversion Request Form-for mutual fund units)]

5 Signature(s)

Sole/First Holder

Name

Second Holder

Name

Third Holder

Name

ACKNOWLEDGEMENT

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

DP ID IN304203

Client ID

Name of First Holder

Name of Second Holder

Name of Third Holder

Signature of the Authorised Signatory

Date DD MM YYYY

Seal/Stamp of Participant