

Request for Closure of Trading Account

Date: ____ / ____ / ____

Branch: _____

To,
 The Manager,
 Client Registration Department,
 Shriram Financial Services Private Limited,
 Rukmini Towers, 3rd & 4th Floor,
 # 3/1, Platform Road, Sheshadripuram,
 Bangalore - 560020

Dear Sir,

I/We hereby request you to close my/our Trading account with you with following account details.

Client Name	
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Trading A/C No	
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Reason Of Closure:	
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I declare and confirm that all the transactions in my trading account are true /authentic and I do not have any grievances / complaints with Shriram Financial Services Private Limited with regard to transactions in my trading account”

Yours truly,

X

Client Signature

To Be filled by Branch		For Head office
Branch Stamp:	Particulars of Employee accepting the request	
	Name:	Entered By:
	Emp id:	
	Designation:	Verified By:
Signature:		