



Annexure Q APPLICATION FOR CLOSING AN ACCOUNT

To

INTEGRATED ENTERPRISES (INDIA) LIMITED
Regd. Office: 5A, 5th Floor, Kences Towers,
No.1, Ramakrishna Street, North Usman Road,
T.Nagar, Chennai – 600 017.

Branch Ref. No.	
H.O. Ref. No.	
Courier Ref. No.	

Date (dd-mm-yy)			
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I/We hereby request you to close my/our account bearing Client ID _____ with you.

DP ID 300441/301313/300757	Client-ID		
		Name(s) of the holder(s)	
First / Sole Holder			
Second Holder			
Third Holder			
		Signature(s)	
Reason for Closing (Mandatory)			
First / Sole Holder			
Second Holder			
Third Holder			
Telephone No.		Mobile No.	

Please enclose Account Transfer Instruction (Annexure –LA) along with this form (if any)