

## Account Closure/Deactivation Form

|                                                                                                                                                                                                                                                                                                                                                                                                                                                            |          |                                                    |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------|------------------------|
| Zerodha Broking Limited <input type="checkbox"/> Trading account <input checked="" type="checkbox"/> Demat account (Please tick ✓ the appropriate)                                                                                                                                                                                                                                                                                                         |          |                                                    |                        |
| Closure Initiated by <input checked="" type="checkbox"/> BO <input type="checkbox"/> DP <input type="checkbox"/> CDSL                                                                                                                                                                                                                                                                                                                                      |          | Application number: _____ Dated: <u>14/08/2026</u> |                        |
| To be filled by the BO (in case of BO-initiated closure). Please fill all the details in BLOCK LETTERS in English                                                                                                                                                                                                                                                                                                                                          |          |                                                    |                        |
| Dear Sir/Madam,<br>I/We the Sole Holder/Joint Holders/Guardian(in case of Minor) request you to close my/our account with you from the date of this application. The details of my/our account are given below:                                                                                                                                                                                                                                            |          |                                                    |                        |
| Account holder details                                                                                                                                                                                                                                                                                                                                                                                                                                     |          | Trading Client ID                                  |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                            |          | ABC123                                             |                        |
| DP ID                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 12081600 | Client ID                                          | 16382682               |
| First/sole holder name                                                                                                                                                                                                                                                                                                                                                                                                                                     |          | GOVARDHANA                                         |                        |
| Second holder name                                                                                                                                                                                                                                                                                                                                                                                                                                         |          |                                                    |                        |
| Third holder name                                                                                                                                                                                                                                                                                                                                                                                                                                          |          |                                                    |                        |
| Address for correspondence recorded in the demat account: <u># 192A, 1<sup>st</sup> floor, Kalyani Vista,</u><br><u>J.P. Nagar 4<sup>th</sup> Phase.</u>                                                                                                                                                                                                                                                                                                   |          |                                                    |                        |
| City: <u>Bengaluru</u> State: <u>Karnataka</u> PIN: <u>560076</u>                                                                                                                                                                                                                                                                                                                                                                                          |          |                                                    |                        |
| Details of remaining security balances in the account (if any)                                                                                                                                                                                                                                                                                                                                                                                             |          |                                                    |                        |
| Reasons for closing the account                                                                                                                                                                                                                                                                                                                                                                                                                            |          | PERSONAL                                           |                        |
| Balance remaining in the account (if any) to be: <input type="checkbox"/> partly rematerialised and partly transferred <input type="checkbox"/> rematerialised<br><input type="checkbox"/> transferred to another account (account number given below) <input checked="" type="checkbox"/> not applicable                                                                                                                                                  |          |                                                    |                        |
| DP ID                                                                                                                                                                                                                                                                                                                                                                                                                                                      |          | Client ID                                          |                        |
| Balance present in account for: <input type="checkbox"/> Ear-marked <input type="checkbox"/> Pending for rematerialisation <input type="checkbox"/> Pending for dematerialisation <input type="checkbox"/> Pledged <input type="checkbox"/> Frozen <input type="checkbox"/> Lock-in                                                                                                                                                                        |          |                                                    |                        |
| <b>Declaration:</b> In case of account closure due to shifting of account<br>I/We declare and confirm that all the transactions in my/our demat account are true/authentic.                                                                                                                                                                                                                                                                                |          |                                                    |                        |
| First holder signature                                                                                                                                                                                                                                                                                                                                                                                                                                     |          | Second holder signature                            | Third holder signature |
| If DP or CDSL initiates account closure, signature(s) of account holder(s) not required.                                                                                                                                                                                                                                                                                                                                                                   |          |                                                    |                        |
| (For office use only) <b>Acknowledgment:</b> We hereby acknowledge the receipt of the your instruction for closing the following account subject to verification on: _____                                                                                                                                                                                                                                                                                 |          |                                                    |                        |
| DP ID: _____                                                                                                                                                                                                                                                                                                                                                                                                                                               |          | Client ID: _____                                   | Application no: _____  |
| First/sole holder name                                                                                                                                                                                                                                                                                                                                                                                                                                     |          |                                                    |                        |
| Second holder name                                                                                                                                                                                                                                                                                                                                                                                                                                         |          |                                                    |                        |
| Third holder name                                                                                                                                                                                                                                                                                                                                                                                                                                          |          |                                                    |                        |
| Reason for closure                                                                                                                                                                                                                                                                                                                                                                                                                                         |          |                                                    |                        |
| Instructions to account holder(s)<br>Submit a duly-filled RRF if the balances are to be rematerialised.<br>* In case of demat accounts, deactivation will lead to a freeze being put on all credits and debits on the account.<br>Submit a duly-filled Delivery Instruction Slip [DIS] (off-market instruction slip) if the balances are to be transferred to another account.<br>This requirement is not applicable in the case of "shifting of account". |          |                                                    | Seal & signature       |



Digitally Signed by:  
Govardhana  
Date: 18-08-2026  
03:44 pm