

FREEZE/UNFREEZE REQUEST FORM

Please fill all the details in **BLOCK LETTERS** in English

Ref. No.		Date							
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<input type="checkbox"/> Freeze		<input type="checkbox"/> Unfreeze	
<input type="checkbox"/> BO Account	<input type="checkbox"/> BO ISIN	Freeze ID (system generated, to entered DP If Bo account is frozen):	

Account Details

DP ID	1	2	0	3	3	6	0	0	Client ID							
Name of the Sole/First Holder																
Name of Second Joint Holder																
Name of Third Joint Holder																

Details of Securities. (To be entered for BO - ISIN freeze)

Sr. No.	ISIN	Name of the Security	Quantity For Partial Freeze	Freeze ID (To be entered by DP)
1.				
2.				
3.				
4.				

Attach an annexure duly signed by the account holder(s), if the space above is insufficient.

Frozen For	<input type="checkbox"/> Debit	<input type="checkbox"/> Credit	<input type="checkbox"/> Both
Activation Type	<input type="checkbox"/> Current	<input type="checkbox"/> Future	
Freeze Activation Date*			Freeze Expiry Date
Reason For Freeze			
Freeze Remarks			

*To be entered for future dated freeze.

I/We declare that the particulars given by me/us above are true to the best of my/our knowledge.

Name & Signature of the Account Holder(s)

	Name	Signature
Sole/First Holder		x
Second Holder		x
Third Holder		x

FOR OFFICE USE ONLY

For Unique Stockbro Pvt. Ltd.

_____ Entered by	_____ Verified by	_____ Authorised Signatory
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