

APPLICATION FOR WITHDRAWAL OF POWER OF ATTORNEY

From,

Date : ____ / ____ / ____

To,

JK SECURITIES PRIVATE LIMITED

Opp. People's Bank Park,

Sardar Gunj Road,

Anand - 388 001

Subject : Withdrawal of Power of Attorney

Respected Sir/Ma'am,

I/We request you to withdraw of the Power of Attorney given to you for the purpose of Auto Pay-in facility with effect from _____ (date from which you want to withdraw the POA). I/We request you to withdraw the said POA due to _____
(Reason for withdrawal).

The details of my account are as below.

DP ID	Depository Account Number	Trading Account Number

Name of 1st Holder : _____ Signature : _____

Name of 2nd Holder : _____ Signature : _____

Name of 3rd Holder : _____ Signature : _____

ACKNOWLEDGEMENT

Received an application from Mr./Ms. _____ for
the withdrawal of Power of Attorney.

DP ID : IN 300636

Client ID : _____

Date : ____ / ____ / ____

Participant's Stamp (with Signature & Date)