

Freeze / Unfreeze Request Form

Repository Participant Name /Address / RP ID

Please fill all the details in **Block Letters** in English

Ref No.*		Date *	D	D	M	M	Y	Y	Y	Y
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<input type="checkbox"/> Freeze *	<input type="checkbox"/> Commodity Code	<input type="checkbox"/> Client ID	<input type="checkbox"/> Quantity	<input type="checkbox"/> eWR No / eNWR No
<input type="checkbox"/> Unfreeze *				

Account Details

RP ID *		Client ID*	
Client Name *			

Details (To be entered for freeze/ unfreeze) *						
Commodity Code	WSP ID	WH ID	Client ID	Quantity	UOM	eWR No / eNWR
Total Quantity						

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

Freeze for/ Unfreeze for	<input type="checkbox"/> Debit	<input type="checkbox"/> Credit	<input type="checkbox"/> Both
(If not marked, the default option would be both 'Debit and Credit')			
Activation Type	<input type="checkbox"/> Current	<input type="checkbox"/> Future	
To be entered for future dated freeze.			
Freeze From Date *	D	D	M M Y Y Y Y
Freeze To Date *	D	D	M M Y Y Y Y
Reason For Freeze/ Unfreeze			

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)			
	Sole / First Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
NAME			
SIGNATURE			

=====-(Please Tear Here)-=====

Acknowledgement Receipt

Received Freeze / Unfreeze request from:

RP ID		Client ID	
Client Name			

Repository Participant Seal and Signature