## ACCOUNT RE-ACTIVATION FORM

DATE:

TO, NAYSAA SECURITIES PVT' LTD 102/104, SHIVAM CHAMBERS, S.V.ROAD, GOREGAON (W), MUMBAI: 400 062

## ( To be filled by client )

Client Code	
Client Name	
Reason for	
Reactivation	

I / We hereby request you to please reactivate my / our account and treat this form as intimation for Re-opening of the account. I / We hereby confirm that all the informations provided to you with initial account opening are the same , and / we do agree to abide by the exchange rules and notifications issued till date.

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(Client's Signature and date.)

## FOR OFFICE USE ONLY

Client Code	
Client Name	
Date of Last Transaction	
Date of Activation	
Are all account documents are complete	
Checked and Updated by	