Central Depository Systems (Pvt) Limited

CDS 32B

Request for User Registration Removal of CDS Systems

CDS Participant Name:…….. **Participant Code:**……

We hereby request the CDS to remove the CDS system access, as specified below.

User name provided by the CDS at the time of registration:

e-Mail Address provided to the CDS at the time of registration:

Instructions for removal of user access

[Please insert a tick (√) in the relevant boxes according to the access type which should be removed from the user]

Required Access Level	
CDS Digital Front Desk	
Millennium Depository System	
Viewing of Security Balances	
Decentralized Account Openings	
Entry	
Authorization	
Intra-Transfers	
Entry	
Incoming Authorization	
Outgoing Authorization	
Master File Changes *(pls refer Terms & Conditions)*	
Entry	
Authorization	
Online Account – Broker Portal	
Verification	
Authorization	
CDS eConnect	
Verification	
Authorization	

……..
Removal Effective Date

We hereby confirm that the information given above are true and correct and the CDS shall be absolved from any liability for loss/damage occurred due to any incorrect/false information provided by us.

CEO/Compliance Officer

……	……	……
Name	Signature	Date