

CGT Certificate Request



Customer Basic Information

Date: _____

Account Title _____

User ID _____ **A/C No** _____

You are requested to issue me a CGT Certificate for the period:

Starting From _____ **Till** _____

Thanking you and with best regards,

Signatures: _____

Name: _____

For Office Use

Comments _____

Signature (DSE/BO)

AMD Signature