

-: Checklist of Civil / Criminal / MACP Case :-

For Computerization Purpose

વકિલશ્રીએ નવો કેસ દાખલ કરતી વખતે કેસ પેપર્સ સાથે રજુ કરવું
(PLEASE FEEL THIS FORM IN ENGLISH WITH CAPITAL LETTERS)

NO. OF APPLICANT/ COMPLAINANT		POLICE STATION		YEAR	
		FIR-NO.			
NAME OF APPLICANT/ COMPLAINANT				AGE:	GENDER: M <input type="checkbox"/> F <input type="checkbox"/> O <input type="checkbox"/>
					PHYSICALLY HANDICAPPED: <input type="checkbox"/>
ADDRESS OF APPLICANT/ COMPLAINANT					
APPLICANT MOBILE NO.		APPLICANT E-MAIL ID			
APPLICANT ADVOCATE NAME					
APPLICANT ADVOCATE MOBILE NO.		ENROLMENT NO.			
APPLICANT ADVOCATE EMAIL ID					
NO. OF OPPONENT/ RESPONDENT					
NAME OF OPPONENT/ RESPONDENT				AGE:	GENDER: M <input type="checkbox"/> F <input type="checkbox"/> O <input type="checkbox"/>
					PHYSICALLY HANDICAPPED: <input type="checkbox"/>
ADDRESS OF OPPONENT/ RESPONDENT					
RESPONDENT MOBILE NO.		RESPONDENT E-MAIL ID			
RESPONDENT ADVOCATE NAME					
RESPONDENT ADVOCATE MOBILE NO.		ENROLMENT NO.			
RESPONDENT ADVOCATE EMAIL ID					
ACT					
SECTION					
FEES ENTRY	1) COURT FEES (RS.)				
	2) PROCESS FEES (RS.)				
	3) SEARCH FEES (RS.)				

વકિલશ્રીની સહિ :- _____

FOR OFFICE USE ONLY

CASE TYPE		CASE NO		YEAR	
DATE OF FILING		STAGE			
NEXT DATE		NATURE CODE			
NAME OF JUDICIAL OFFICER					
DESIGNATION		COURT NUMBER			
SUIT VALUE					