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Date of Fili	ng		Filing	——————————————————————————————————————		
			Case	No.		
Case Type	: Civil□Crimi	nal 🗆 Caveat 🗆				
Dotifionou			No. of extra	Petitioners:		
Petitioner Name	<u>:</u>		_			
Gender	· Mala DEam	nale 🗆 Other 🗆	•			
Age						
nationality:		Occupation:	Differen	tly Abled: Yes □No □		
Address						
Town	:	State	Count	ry		
Police Station	:	Post Office		Pin		
Mobile No.	:	_ WhatsApp No	e-mai			
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Petitioner/Resp	ondent :				
Gender Age	: Male□ F				(DD/MM/YYYY)
Nationality	:	0	ccupation	<i>75.</i> **	Differently Abled: Yes □ N [
Address Town	:		State	Country	
Police Station	:		Post Office	Pin	· · · · · · · · · · · · · · · · · · ·
Mobile No.	:	Wh	atsapp No.	email	
Petitioner/Resp	ondent				A 0
Gender	:	emale 🗆	Other 🗆		
Age					(DD/MM/YYYY)
Nationality					Differently Abled: Yes 🗆 N (
Address					_ Differently Abled: Yes LI N L
Town			State		*
Police Station	:		Post Office	Pin	
Mobile No.		Wh	atsapp No.	email	
Petitioner/Resp	oondent :				
Gender	: Male□ F				
Age	:Y	ears.	Dt. Of Birth	<u> </u>	(DD/MM/YYYY)
Nationality		0	ccupation		_ Differently Abled: Yes □ N I
Address					
Town				Country	
Police Station	:		Post Office	Pin	
Mobile No.	:	Wł	natsapp No.	email	
Petitioner/Resp	oondent				
Gender	: Male□ F	emale 🗆	Other 🗆		
Age	:Y	ears.	Dt. Of Birth		(DD/MM/YYYY)
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Police Station			Post Office	Pin	
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Petitioner/Resp	oondent				
Gender	: Male□ I	emale 🗆	Other		
Age	:Y				(DD/MM/YYYY)
Nationality					DJ/MM/ 1777
Address					
Town			_ State	Country	
Police Station Mobile No.			Post Office		
MODILE MO.		W	iatsapp No	email	

Supplementary Form-2

IF THE CASE IS AGAINST AN ORDER PASSED BY ANY SUB-ORDINATE COURT OF ASSAM

Ctata	FIRST APPELLATE COURT	TRIAL COURT
State		
District		
Sub-Ordinate Court Name		
CNR No		* **
Judge's Name		V
Case type		
Case No.		
Year of Regn.		
Date of decision		
CC applied date		
CC Ready date		
State	Police Challan Private Complain	nt Remarks
District	11	Remarks
Police Station	199	
Date of offence		
ot. of filing charge sheet		
IR Type	Written / Oral / Over Phone / By SMS / By e-mail	
IR No. & Year		
nvestigation Officer		
Belt No.		
nvestigating Officer-1		
Belt No. 1		
rials	Session / Regular / Summon / Summary	
Offence Remark		

Supplementary Form-3

SUBMIT FOLLOWING DETAILS IN CASE OF MOTOR VEHICLE ACCIDENT CASES

	7,4	
State		
District		
Taluka / Sub-Division		
Police station		1.14
FIR Type	Written / Oral / Over phone / By SMS / By e-mail	
CR No.	,	
Year		
Date of Accident		
Time of Accident		
Place of Accident		
Name		
Compensation claimed	1 11	
Name of Insurance Company		
Vehicle type	Drivato / Communication	
	Private / Commercial / Government / Army	
Vehicle Registration No.		
Driving Licence No.		
DL Issuing Authority		

Authorised Signatory

5.5.

THE GAUHATI HIGH COURT

(HIGH COURT OF ASSAM, NAGALAND, MIZORAM AND ARUNACHAL PRADESH)

		Case No.:			
					nei.
	Makadaman	- Versus		Appell	ant(s)
	·	- Versus			
				Respon	ndent(s)
Peti	tioner's Advocate(s):				
SI No.	Name of Advocate	e-mail ID	Enrolment Number	Mobile Number	WhatsApp Number
1.					
2.			* !		/
3.					
4.					-
	WhatsApp/ Tele	this undertaking that I gram facility as my Clie numbers that I shall case.	nt(s) does/ do	not have Wha	atsApp facility
		Signature of A	dvocate:		
•	an undertaking ti	WhatsApp/Telegram n hat whatever message o e, the same shall be de	umber. My Ad	Court proceed	ings is shared
		Signature o	of Client:	-	