

CHECK LIST
CASE INFORMATION FORMAT

Civil ☐
Criminal ☐

DISTRICT.....

S. No	PLAINTIFF/PETITIONER/ COMPLAINANT/APELLANT/DECREE HOLDER ETC. PLEASE FILL UP ALL THE RELEVANT FIELDS & (*) FIELDS ARE MANDATORY			
1	Name Of the Plaintiff / Complainant / Etc.			
2	S/o W/o D/o			
3	Address			
4	Aadhar Card No.		Pin Code:	
5	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Nationality	INDIAN
				Other:
6	Date of Birth	/ /	Age	
7	Mobile No.		E-mail:	
8	Act / Section			
9	Valuation of Suit		Court Fee Ascertained:	
			Court Fee Paid /Deposited:	
10	Police Station	In Criminal Matters only		
11	F.I.R No. & Year	In Criminal Matters only		

S. No	DEFENDANT/ACCUSED / RESPONDENT / JUDGEMENT DEBTOR ETC. PLEASE FILL UP ALL THE RELEVANT FIELDS & (*) FIELDS ARE MANDATORY			
1	Name of the DEFENDANT / ACCUSED Etc.			
2	S/o W/o D/o			
3	Address			
4	Aadhar Card No.		Pin Code:	
5	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Nationality	INDIAN
				Other
6	Date of Birth	/ /	Age	
7	Mobile No.		E-mail:	

S. No	ADVOCATE FOR PLAINTIFF/COMPLAINANT/PETITIONER/ DECREE HOLDER ETC.	
1	Name of the Advocate Enrl No.	
2	Office / Chamber No	
3	Mobile No.	E-mail:

SUBMITTED BY :-.....
PLAINTIFF/ PETITIONER / DEFENDANT / ACCUSED/ OTHER/ ADVOCATE

EXTRA PARTY INFORMATION

1	Name Of the Extra Party			
2	S/o W/o D/o			
3	Address			
4	Aadhar Card No.		Pin Code:	
5	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Nationality	INDIAN
				Other
6	Date of Birth	/ /	Age	
7	Mobile No.		E-mail:	

1	Name Of the Extra Party			
2	S/o W/o D/o			
3	Address			
4	Aadhar Card No.		Pin Code:	
5	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Nationality	INDIAN
				Other
6	Date of Birth	/ /	Age	
7	Mobile No.		E-mail:	

1	Name Of the Extra Party			
2	S/o W/o D/o			
3	Address			
4	Aadhar Card No.		Pin Code:	
5	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Nationality	INDIAN
				Other
6	Date of Birth	/ /	Age	
7	Mobile No.		E-mail:	

SUBMITTED BY :-.....
PLAINTIFF/ PETITIONER / DEFENDANT / ACCUSED/ OTHER/ ADVOCATE