## OFFICE OF THE DISTRICT JUDGE, GHAZIABAD

Dated: November 26 2024

ORDER . 75 /2024)

The term of Advocate Commissioners for (1)- Oath (2)- Accounts (3)- Survey (4)-Simple Measurements where no survey is necessary (5)- General Commissioner for service of injunction orders, stay orders or other notices & all other purposes & (6)- Recording of evidence, will expire on 31.12.2024. Therefore, applications in the enclosed format are invited from the practicing Advocates of Ghaziabad and Registered from Bar Council of Uttar Pradesh by 15.12.2024 for preparing a panel of such Commissioners for the Headquarter, Ghaziabad, Tehsil Sadar, Tehsil Modinagar & Tehsil Loni for the year 2025.

## The criterion for the appointment will be as under:-

1- Oath Commissioner

Practicing advocates enrolled not earlier than 01.01.2017

Accounts Commissioner

Practicing advocates having special knowledge of accounts

Survey Commissioner

Practicing advocates having special knowledge of survey

4- Commissioner for Simple measurements : where no survey is necessary.

Practicing advocates enrolled in between 02.01.2007 to

31.12.2016

5- General Commissioner except: Recording of Evidence.

Practicing advocates enrolled in between 01.01.2007 to Survey &

31.12.2016

6- Commissioner for Recording of Evidence: Practicing Advocates having at least practice of 25 years.

One Advocate can apply only for one of the aforesaid posts. The applications shall be received in the Administrative Office of the District Judge, Ghaziabad till 15.12.2024. No application after that date shall be entertained.

District & Sessions Judge,

Ghaziabad. Ghaziabat

## Copy forwarded to:-

- 1. The President/Secretary, Bar Association, Ghaziabad.
- 2 The President/Secretary, Tehsil Bar Association, Modinagar.
- 3- The President/Secretary, Tehsil Bar Association, Loni.
- 4- The President/Secretary, Tehsil Sadar Bar Association, Ghaziabad.

. 5- Notice Board.

District Judge Ghaziabad

लीवियो वास्त एयनाव धर्मनाडी हेत Computer

## PROFORMA OF THE APPLICATION FOR ENLISTMENT AS COMMISSIONER FOR THE YEAR 2025

1-	Name of the applicant		. *		Self- attested Photograph
	(As mentioned in the enrollment certificate)	)		14	of the
2-	Father's name			•	applicant
3-	Date of Birth			<u> </u>	
4-	Whether enrolled as a pleader/vakil/advocat	te		-	Tr.
5-	Enrollment number with date of enrollment should also be clearly disclosed as to wheth is presently valid) (Enclose self attested cop	er his certificate	has been	renewed and if so up to a	of a pleader it what period it
6-	Length of practice				
7-	Chamber number in the Bar Association Building where the applicant practices	et .	92		4
8-	Residential address in the city				
9-	Phone Number/Mobile Number				
10-	Permanent Address				
	Whether he/she belongs to Scheduled Caste/ Scheduled Tribe or Other Backward Classes				
12-	His monthly income from legal practice				
13-	Whether the applicant desires to be consider  (a) Oath Commissioners  (b) Accounts Commissioners  (c) Survey Commissioners	ed for being enli	sted as- (	Tick only one)	
	(d) Commissioners for Simple Measureme  (e) General Commissioner for service of in  (f) Commissioners for Recording of evide  (No advocates will be entitled for being enlist  more than one list)	junction orders, 5 ence	vey is neo	cessary s or other notices & all ot	her purposes
14-	Whether any adverse remarks have ex	ver been Reco	rded ag	ainst the applicant by	any court
15-	Whether the applicant ever worked as- (a) Oath Commissioner (b) Accounts Cor Simple Measurements where no survey orders, Stay orders or other notices & al	is necessary (e)	General C	Commissioner for service	of injunction
	If so, mention the period.	in the second se			
	Name of senior arive cate, if any, with whom applicant has worked at the initial stage or is at present.	the working			
	at present.	110			
17-	Remarks, if any.	****			
Date		PROTECTION AND THE PROTECTION AN	ox 1	el	
1. Ea 2. I 3. II	losure(Self Attested):- nrollment Certificate issued by Bar Council o D-Card issued by Bar Council of U.P. D-Card/ Certificate of Practice issued by Bar a adhar Card		ziabad	Signatures of the applica	ent