

SCHEDULE - II

Request Form for Video Conference

1. Name of the Applicant: _____
2. Contact Details of the applicant:
 - a. Mobile Number: _____
 - b. Email Address: _____
 - C. Other Details: _____
3. Case Number/CNR Number(if any): _____
4. Cause Title: _____
5. Proposed Date of Conference(DD/MM/YYYY) : _____
6. Location of the Court Point(s): _____
7. Location of the Remote Point(s): **District Court, Banaskantha at Palanpur.**
8. Names & Designation of the Participats at the Remote Point:

9. Reason for Video Conferencing: _____
In the matter of: _____
10. Nature of Proceedings: _____
Hearing Evidence Recording Others

I have read and understood the provision of **Rules for Video Conferencing for Courts** (hyperlink). I undertake to remain bound by the same to the extent applicable to me. I agree to pay video conferencing charges if so, directed by the court.

Signature of the applicant/autorised signatory:

Date:

For use of the Registry/Court Point Coordinator

A) Bench assigned:

B) Hearing:

Held on (DD/MM/YYYY):

Commencement Time:

End Time:

Number of hours;

C) Costs

Overseas transmission charges if any :

To be Incurred by Applicant/Respondent :

To be shared equally:

Waived:

as ordered by the Court:

Signature of the authorised officer:

Date: