

DISTRICT AND SESSIONS COURT, MAHESANA
M.A.C.T. CASE FILING FORM
(TO BE FILLED IN ENGLISH CAPITAL LETTERS ONLY)

APPLICANT DETAILS

APPLICANT'S NAME :
GENDER : MALE () FEMALE () AGE: CASTE:
FATHER/MOTHER/
HUSBAND NAME :
ADDRESS :
MOBILE NUMBER : EMAIL ID :
NATIONALITY : OCCUPATION :
ADVOCATE'S DETAILS : (1) NAME:
(2) MOBILE NO:
(3) ENROLMENT NO:

APPLICANT'S BANK DETAILS

BANK NAME :
ACCOUNT NO :
BRANCH NAME :
IFSC CODE :
FIRST PAGE OF PHOTO COPY OF PASSBOOK : ()
APPLICANT'S AADHAAR NO.:
APPLICANT'S PERMANENT ACCOUNT NO.:
(IF ASSESSED TO INCOME-TAX)
IF NOT HAVING PERMANENT ACCOUNT NUMBER.
REFERENCE/APPLICATION NO. FOR PANCARD:

OPPONENT'S DETAILS

NAME :

GENDER : MALE () FEMALE () CASTE :

FATHER/MOTHER/
HUSBAND NAME :

ADDRESS :

MOBILE NO. : EMAIL ID :

NAME OF INSURANCE COMPANY:

CASE DETAILS:

CLAIM:Rs.

FATAL () INJURY() DAMAGE()

SECTION:

INTERIM APPLICATIONS : YES/NO

FIR NO.

FIR YEAR:

DATE OF ACCIDENT:

PLACE OF ACCIDENT:

DATE:

.....
SIGNATURE

FOR OFFICE USE ONLY

CASE TYPE :

CASE NUMBER :

DATE OF FILING :

NEXT DATE :