

SCHEDULE II

Request Form for Video Conference

- 1. Case Number / CNR Number (if any)
- 2. Cause Title
- 3. Proposed Date of conference (DD/MM/YYYY):_____
- 4. Location of the Court Point(s):_____
- 5. Location of the Remote Point(s):_____
- 6. Names & Designation of the Participants at the Remote Point:_____
- 7. Reasons for Video Conferencing:
In the matter of:
- 8. Nature of Proceedings: Final Hearing ☐ Motion Hearing ☐ Others ☐

I have read and understood the provisions 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/authorized 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 authorized officer:

Date:
