SCHEDULE II

Request Form for Video Conference

1 2 3 4 5 5	Case Number / CNR Number (if any) Cause Title Proposed Date of conference (DD/MM/YYYY): Location of the Court Point(s): Location of the Remote Point(s): Names & Designation of the Participants at the Remote Point: Reasons for Video Conferencing: In the matter of:
8	Nature of Proceedings: Final Hearing Motion Hearing Others
henere and the second s	I have read and understood the provisions of <u>Rules for Video Conferencing for Courts (hyperlink)</u> . 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/authorised signatory:
	Date:
	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: