

KYL (KNOW YOUR LITIGANT) FORM
(CIVIL FILING)

Court/Office Use Only

Case filing No:-

Case Registration No:-

CNR No. :-

***In the Court of**

***Case Type:**

***Plaintiff Name:**

Father/Husband Name:

***Age:**

Gender:

***Mobile Number:-**

Email Id:-

Aadhar/UID No.:

Address:-

Pin-code:

Extra Party Count (If any):-

***Name of Advocate:**

***Registration Number:**

***Mobile Number:-**

Email Id:-

Suit Valuation:

Amount:

***Act1:**

Act Section1:

Act2:

Act Section2:

Act3:

Act Section3:

***Defendant Name:**

Father Name:

***Age:**

Gender:

Mobile Number:-

Email Id:-

Aadhar/UID No.:

Address:-

Pin-code:

Extra Party Count (If any):-

Enclosures (Please Tick√):-

Affidavit

Council Letter

Copy of Plaint Application

Photo ID Proof

KYL (KNOW YOUR LITIGANT) FORM
(CRIMINAL FILING)

Court/Office Use Only

Case filing No:-

Case Registration No:-

CNR No. :-

***In the Court of**

***Case Type:**

***Prosecution:**

Father/Husband Name:

***Age:**

Gender:

***Mobile Number:-**

Email Id:-

Aadhar /UID No.:

Address:-

Pin-code:

Extra Party Count (If any):-

***Name of Advocate:**

***Registration Number:**

***Mobile Number:-**

Email Id:-

***Act1:**

Act Section1:

Act2:

Act Section2:

Act3:

Act Section3:

***Accused:**

Father Name:

***Age:**

Gender:

***Mobile Number:-**

Email Id:-

Aadhar /UID No.:

Address:-

Pin-code:

Extra Party Count (If any):-

FIR No.:-

Year:

Crime No.:-

Police Station

Enclosures (**Please Tick√**):-

Affidavit

Council Letter

Copy of Complaint Application

Photo ID Proof

KYL (KNOW YOUR LITIGANT) FORM
(BAIL APPLICATION FILING)

Court/Office Use Only

Case filing No:-

Case Registration No:-

CNR No. :-

*In the Court of

* Accused:

Father/Husband Name:

*Age:

Gender:

*Mobile Number:-

Email Id:-

Aadhar /UID No.:

Address:-

Pin-code:

FIR No.:-

Year:-

Crime No.:-

Police Station:-

Name of Advocate:

Bar Registration Number:

*Mobile Number:-

Email Id:-

*Prosecution:- State Government

*Name of Advocate:

*Bar Registration Number:

*Mobile Number:-

*Act1:

Act Section1:

Act2:

Act Section2:

Act3:

Act Section3:

Enclosures (Please Tick):-

Affidavit

Council Letter

Copy of Complaint Application

Photo Copy of ID Proof