SCHEDULE-II

Request Form for Video Conference.

1. Case Number /CNR Number (if any): _____.

2. In the Court of : _____.

3. Proposed date of conference (DD/MM/YYYY): _____/_____/_____.

4. Location of the Court Point: _____.

5. Location of the Remote Point: _____.

6. Name & Designation of the Partipants: _____.

7. Reason for Video Conferencing:_____.

In the matter of _____.

8. Nature of proceedings: Final Hearing ☐, Motion Hearing ☐, others ☐

9: Phone No: _____ Email ID: _____

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/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 order by the Court. _____.

Signature of the authorised officer: _____

Date: _____