Annexure – I

Information to be submitted by plaintiff at the time of institution of suit.

Institution of Suit / Application etc.

<u>New Institution in Trial Court</u>

1.	Annexure – I (a)	:	Information to be provide by Plaintiff/Plaintiff No. 1
2.	Annexure – I (b)	:	If more than one Plaintiffs are there, details of each Plaintiff is to be submitted independently in Annexure I (b)
3.	Annexure – I (c)	:	Plaintiff to provide known information of Defendant/Defendant no. 1 at the time of institution of suit.
4.	Annexure – I (d)	:	If more than one Defendants are there, details of each Defendant is to be submitted independently Annexure I (d)

ANNEXURE - I (a)

Information to be provided by Plaintiff / Plaintiff No. 1

Tick (✓) the correct option, whenever necessary.

- **PLAINTIFF DETAIL INFORMATION :**

Whether Plaintiff/Applicant is an Organisation *(Tick (✓) the correct option)*	☐ Yes			☐ No				
If Yes, Organisation Details								
Full name of Plaintiff / Plaintiff No.1 *(Tick (✓) the correct option)*	Mr	Mrs	Ms	Shri	Dr	CA	Er	Prof
	_____ Surname		_____ First Name		_____ Middle Name			
Complete Postal Address of Plaintiff / Plaintiff No.1								
Country of Plaintiff / Plaintiff No.1 If other, provide name *(Tick (✓) the correct option)*	☐ India			☐ Other _____				
Nationality of Plaintiff / Plaintiff No.1								
Mobile No of Plaintiff / Plaintiff No.1								
How many plaintiff are there (Provide Number)								
Email-id of Plaintiff / Plaintiff No.1								
Date of Birth of Plaintiff / Plaintiff No.1	_____/_____/_____ (DD/MM/YYYY)							
Age of Plaintiff / Plaintiff No.1								
Filing through Advocate or In person *(Tick (✓) the correct option)*	☐ Advocate			☐ In Person				
Gender *(Tick (✓) the correct option)*	☐ Male		☐ Female		☐ Transgender			
Occupation of Plaintiff / Plaintiff No.1								
Name of Advocate	_____ Surname		_____ First Name		_____ Middle Name			
Bar Reg. No								

CASE DETAILS :

Suit Valuation		Case Filing Amount	
Date of Filing(dd/mm/yyyy)	_____/_____/_____	Time of Filing	
Prayer in suit			
Cause of Action in brief			
Date Cause of Action			
Name of Act applicable and relevant section	1. _____ _____ 2. _____		

ANNEXURE - I (b)

- If more than one Plaintiffs are there, details of each Plaintiff is to be submitted independently.

● **Extra Party Information of Plaintiff No. _____ (Plaintiff Side)**	
Full name of Plaintiff No. _____	
Full Address	
	State
	District Taluka
	Village Pincode ▢▢▢▢▢▢
Country If other, provide name *(Tick (✓) the correct option)*	▢ India ▢ Other _____
Nationality	
Mobile	
Email-id	
Date of Birth	_____/_____/_____ (DD/MM/YYYY)
Age	
Gender *(Tick (✓) the correct option)*	▢ Male ▢ Female ▢ Transgender
Occupation	

ANNEXURE - I (c)

● **PLAINTIFF TO PROVIDE KNOWN INFORMATION OF DEFENDANT / DEFENDANT NO 1**

Whether Defendant/Applicant is an Organisation *(Tick (✓) the correct option)*	☐ Yes ☐ No							
If Yes, Organisation Details								
Full name of Defendant /Defendant No.1 *(Tick (✓) the correct option)*	Mr	Mrs	Ms	Shri	Dr	CA	Er	Prof
	_____ Surname		_____ First Name		_____ Middle Name			
Complete Postal Address of Defendant / Defendant No.1								
Country of Defendant /Defendant No.1 If other, provide name *(Tick (✓) the correct option)*	☐ India ☐ Other _____							
Country of Defendant / Defendant No. 1								
Nationality of Defendant / Defendant No. 1								
Mobile No of Defendant / Defendant No. 1								
How many defendant are there (Provide Number)								
Email-id of Defendant / Defendant No.1								
Age of Defendant / Defendant No.1								
Gender *(Tick (✓) the correct option)*	☐ Male ☐ Female ☐ Transgender							
Occupation of Defendant / Defendant No.1								

ANNEXURE - I (d)

- If more than one Defendants are there, details of each Defendant is to be submitted independently.

● **Extra Party Information of Defendant No. _____**	
Full name of Defendant / Defendant No. ____	
Full Address	
	State
	District Taluka
	Village Pincode ☐☐☐☐☐☐
Country If other, provide name *(Tick (✓) the correct option)*	☐ India ☐ Other _____
Nationality	
Mobile No.	
Email-id	
Age	
Gender *(Tick (✓) the correct option)*	☐ Male ☐ Female ☐ Transgender
Occupation	