

**KNOW YOUR LITIGANT (KYL) FORM**

Civil  Criminal

\*In the Court of .....

\*Case type .....

-----**Party Details**-----

\*Plaintiff / Complainant : ..... or State of U.P.

Father / Husband: ..... Extra Party Count :

\*Age:  \*Gender (M/F/T):  \*Mobile:

\*Address: .....

Pin code:  \*Police Station: ..... \*District: .....

E-mail: ..... Aadhaar No:

\*Advocate: ..... Reg. Number: ..... or In person:

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\*Defendant / Accused : ..... or State of U.P.

Father / Husband: ..... Extra Party Count :

Age:  \*Gender (M/F/T):  Mobile:

\*Address: .....

E-mail: ..... Aadhaar No:

-----**Case Details**-----

Suit Valuation:  Amount:

Act: ..... Act Section: .....

Act: ..... Act Section: .....

Remarks:

-----**Declaration**-----

\*I hereby declare that the details furnished above are true and correct to the best of my knowledge. In case, any of the above information is found to be false, I may held liable for it.

Date:.....

Place:.....

**(Litigant's Signature)**

Column marked with \* is mandatory

\* चिन्ह वाले को भरना अनिवार्य है

**KNOW YOUR LITIGANT (KYL) FORM**

Case type .....**Bail Application**.....

\*In the Court of .....

-----**Party Details**-----

\*Accused Name : .....

Father / Husband: .....

\*Age:  \*Gender (M/F/T):  \*Mobile:

\*Address: .....

Pin code:  Police Station: ..... District: .....

E-mail: ..... Aadhaar No:

\*Advocate: ..... Reg. Number: ..... **or** In person:

FIR Number:  Year:

Crime Number:  Year:

Prosecution : **State of U.P.**

Advocate: ..... Reg. Number: .....

DGC  ADGC  APO  (Tick any one)

-----**Act Details**-----

Act: ..... Act Section: .....

Act: ..... Act Section: .....

Remarks:

-----**Declaration**-----

\*I hereby declare that the details furnished above are true and correct to the best of my knowledge. In case, any of the above information is found to be false, I may held liable for it.

Date:.....

Place:.....

**(Litigant's Signature)**