

FORM OF APPLICATION-CUM-AFFIDAVIT

Application-cum-Affidavit Form for providing free legal service under Section 12 of Legal Services Authorities Act, 1987 read with Rule 19 of the Haryana State Legal Services Authorities Rules, 1996.

(Haryana State Legal Services Authority, Punjab and Haryana High Court Legal Services Committee, District Legal Services Authority, Sub-Divisional Legal Services Committee)

1. Particulars

(a) Name of applicant(with telephone number, if any)

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(b) Name of Father/Husband

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(c) Occupation

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(d) Full Residential Address

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(e) Detail of Annual Income

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(f) Whether the applicant is -

(i) A member of a Scheduled Caste or Scheduled Tribe or Backward Class(attach certificate);

or

(ii) A victim of trafficking in human being or begar as referred to in Article 23 of the Constitution;

or

(iii) Woman;

or

(iv) Child, i.e., a person who has not attained the age of 18 years(or upto 21 years if he is under the guardianship of some person as per the provisions of the Guardianand Wards Act, 1890.);

or

(v) Mentally ill or otherwise disabled person such as suffering from blindness, low vision, hearing impairment, mental retardation, locomotor disability or leprosy-cured patient;

or

(vi) A person under circumstances of undeserved want such as being victim of mass disaster, ethnic violence, caste atrocity, flood, drought, earthquake or disaster;

or

(vii) Industrial workman;

or

(viii) A person in custody, including custody in a protective home within the meaning of clause (g) of section 2 of the Immoral Traffic (Prevention) Act, 1956 or in a juvenile home within the meaning of clause (j) of section 2 of the Juvenile Justice Act, 1986;

or

(ix) A person in a psychiatric hospital or nursing home within the meaning of clause (q) of the Mental Health Act, 1987;

or

(x) In receipt of annual income less than Rs.25,000/- from all sources(Attach affidavit duly attested by an Oath Commissioner).

2. Mode in which Legal Aid is required:

Whether :

(a) Through Legal Advice,

or

(b) By way of engaging counsel to prosecute or defend a case,

or

(c) Legal service through Mediation Centre.

3. Name and Address of the opposite party, with telephone number(if any)

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4. Brief facts of the case

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NOTE : - Attach separate sheet of plain paper(if required).

5. Whether the applicant in the event of his being granted bail, will be able to furnish the requisite surety bond on his own ?
If so, full address and particulars of surety be specified.
(In bail matters)

6. Any other matter which the applicant may wish to highlight.

7. Undertaking

I assure the Authority /Committee through this undertaking that in case the court finally awards any monetary benefit in my favour, the expenses of litigation borne by the Authority/Committee on my behalf will remain the first charge on that monetary benefit/decree. I further bind myself that for realising the said benefit/decree in my favour in order to recover the said expenses of litigation, Member Secretary/Secretary/Chairman of the Authority/Committee will be legally entitled to act as my special attorney without any further legal document.

I shall comply with any requisition and direction that may be made by the Member Secretary/Secretary/Chairman of the concerned Authority/Committee.

I shall furnish full and true information of all facts of my case to the advocate to be provided by the Authority/Committee.

I agree that my case may be listed before the Lok adalat if at any stage it is considered by the Authority/Committee that my matter can be considered or settled through Lok Adalat.

8. Affidavit

I solemnly affirm and declare that the above mentioned facts are true and correct according to my own knowledge and belief and further that I have not concealed any fact therefrom.

I further solemnly affirm and declare that I have been made to understand that in case of any false affirmation of facts, I shall be liable for legal action.

I further declare that no such or similar petition on the same cause of action has been filed by me earlier in any other capacity in any Court of competent jurisdiction.

Place: _____
thumb
of the deponent/applicant.

Signature or
impressions

Dated: _____

VERIFICATION:

Verified that the contents of my above affidavit are correct and true to my own knowledge and that nothing has been concealed therefrom.

Place: _____
thumb
of the deponent/applicant.

Signature or
impressions

Dated: _____

Note:- This affidavit must be sworn on non-judicial stamp paper of appropriate value under the Stamp Act of our State and attested by an Oath Commissioner or Notary Public or Judicial Magistrate 1st Class.

Seal of Oath Commissioner/Notary Public/JMIC

OFFICE REMARKS

Case examined, applicant is entitled/not entitled for getting free legal aid.

Member Secretary,
Haryana State Legal Services Authority,
Court Legal Services Committee.

Secretary,
Punjab and Haryana High

Secretary,
District Legal Services Authority,
Committee,

Chairman,
Sub-Divisional Legal Services

Sh./Smt. is appointed as Advocate for representing the applicant. He be informed accordingly.

Authorized Officer.

Note:- (1) In the case of minors or persons of unsound mind, the application is to be made by his/her next friend/guardian and his/her own affidavit is also to be sworn by the next friend/guardian and got attested.

(2) Tick mark the relevant and strike off the irrelevant column.