

**FORM I**  
**MEMORIAL**  
(Rule 4 (3))

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**PHOTOGRAPH**  
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1. Name of the applicant: \_\_\_\_\_
  
2. Father's/Husband's name: \_\_\_\_\_
  
3. Date of Birth: \_\_\_\_\_
  
4. Whether SC/ST/OBC/General: \_\_\_\_\_
  
5. Address( Residence): \_\_\_\_\_  
\_\_\_\_\_ Pin \_\_\_\_\_  
  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail \_\_\_\_\_  
  
Address (Office): \_\_\_\_\_  
\_\_\_\_\_ Pin: \_\_\_\_\_  
  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_
  
6. Educational qualifications (Please attach attested photocopies): \_\_\_\_\_
  
7. Enrolment No. and date (Please attach attested photocopies): \_\_\_\_\_

8. Practising in: \_\_\_\_\_

Civil side: \_\_\_\_\_

Criminal side: \_\_\_\_\_

Taxation: \_\_\_\_\_

Revenue courts: \_\_\_\_\_

9. Whether income tax assessee: \_\_\_\_\_

10. The memorial of (name of the applicant in block letters) showeth: \_\_\_\_\_

1. that the memorialist is a person eligible for appointment as notary under the notaries Act, 1952 and clause (a) of rule 3 of the Notaries Rules, 1956;
2. that the memorialist resides in \_\_\_\_\_ (here state the name of the local area or name of court where he intends to practise) and will reside for upwards of \_\_\_\_\_ (state how long);
3. that the number of notaries in the local area is insufficient for the requirements thereof (the grounds of the statement should be added):
4. that no previous application of the memorialist has been rejected or withdrawn by him, within the preceding six-months.

The memorialist, therefore, prays that the government be pleased to appoint and admit him as a notary under and by virtue of the notaries Act, 1952(53 of 1952) and clause (a) of the rule (3) of the Notaries Rules, 1956 to practice in \_\_\_\_\_ (here state the name of the local area).

Date: \_\_\_\_\_ day of \_\_\_\_\_

Signature of the Applicant

Sl.No.	Name and address of Organisation	Profession	Name and address of the firm/Orgn.	Signature (with seal)
1.				
2.				
3.				
4.				
5.				

Note: (Under rule 4 (3) the memorial should be countersigned by a Judicial Magistrate, a Manager of a Nationalized Bank, a Merchant and two prominent inhabitants of the area where he intends as a notary)



**FORM I**  
**MEMORIAL**  
(Rule 4 (2))

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PHOTOGRAPH  
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- 1 Name of the applicant: \_\_\_\_\_
- 2 Father's/Husband's name: \_\_\_\_\_
- 3 Date of Birth: \_\_\_\_\_
- 4 Whether SC/ST/OBC/General: \_\_\_\_\_
- 5 Address( Residence): \_\_\_\_\_

\_\_\_\_\_ Pin \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail \_\_\_\_\_

Address (Office): \_\_\_\_\_

\_\_\_\_\_ Pin: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

- 6 Educational qualifications (Please attach attested photocopies): \_\_\_\_\_
- 7 Enrolment No. and date (Please attach attested photocopies): \_\_\_\_\_
- 8 Practising in: \_\_\_\_\_
  - Civil side: \_\_\_\_\_
  - Criminal side: \_\_\_\_\_
  - Taxation: \_\_\_\_\_
  - Revenue courts: \_\_\_\_\_

9 Whether income tax assessee: \_\_\_\_\_

- 10 The memorial of (name of the applicant in block letters) showeth:\_\_\_\_\_
1. that the memorialist is a person eligible for appointment as notary under the notaries Act, 1952 and clause (a) of rule 3 of the Notaries Rules, 1956;
  2. that the memorialist resides in \_\_\_\_\_(here state the name of the local area or name of court where he intends to practise) and will reside for upwards of **life long** (state how long);
  3. that the number of notaries in the local area is insufficient for the requirements thereof(the grounds of the statement should be added):  
**Due to increase in school, college, industries, litigation works and increasing population etc.**
  4. that no previous application of the memorialist has been rejected or withdrawn by him, within the preceding six-months.

The memorialist, therefore, prays that the government be pleased to appoint and admit him as a notary under and by virtue of the notaries Act, 1952(53 of 1952) and clause (a) of the rule (3) of the Notaries Rules, 1956 to practice in (here state the name of the local area).

Date:\_\_\_\_\_day of \_\_\_\_\_

Signature of the Applicant

Sl.No.	Name and address of Organisation	Profession	Name and address of the firm/Orgn.	Signature (with seal)
1.				
2.				
3.				
4.				
5.				

Note: (Under rule 4 (3) the memorial should be countersigned by a Judicial Magistrate, a Manager of a Nationalized Bank, a Merchant and two prominent inhabitants of the area where he intends as a notary)







(FORM II)  
(Rule 4(2))

PHOTOGRAPH

1.Name\_\_\_\_\_

2.Father's/Husband's name \_\_\_\_\_

3.Date of birth \_\_\_\_\_

4.Whether SC/ST/OBC/General\_\_\_\_\_

5.Address(Residence)\_\_\_\_\_

PIN\_\_\_\_\_

Telephone\_\_\_\_\_ Fax\_\_\_\_\_ E-mail\_\_\_\_\_

Address(office)\_\_\_\_\_

\_\_\_\_\_ PIN \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

6. Educational qualifications\_\_\_\_\_

7. Date of joining government service \_\_\_\_\_

8. Date of retirement\_\_\_\_\_

9. Post held at the time of retirement\_\_\_\_\_

10. Area where the memorialist intends to practice as Notary  
\_\_\_\_\_

Signature of the applicant

Dated\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Statement of Column 10(3)

Due to increase in school, college, industries, litigation works and increasing population etc.

