

FORM I

MEMORIAL
(Rule 4 (2))

PHOTOGRAPH

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:_____ Email:_____

Address(Office):_____

_____ Pin_____

_____ Telephone:_____ Fax:_____ Email:_____

6. Educational qualifications (Please attached attested photocopies):_____

7. Enrolment No. and date(Please attached 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 that no previous application of the memorialist has been rejected or withdrawn by him, within the preceding six-months.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 JudicialMagistrate, a Manager of a Nationalised Bank, a Mechant and two prominent inhabitants of the area where he intends as a notary)