Bar Council of Maharashtra & Goa

2nd Floor, High Court Extension, Fort, Mumbai - 400 032.
Tel. : 6938 1033 / 6938 1037

FORM No. _____

(Price Rs. 2000/-)

APPLICATION FOR RESUMPTION OF PRACTICE AS AN ADVOCATE

To,
The Secretary,
Bar Council of Maharashtra & Goa
Mumbai 400 032.

Sub : Resumption of practice as an Advocate

Sir/Madam,

Under provisions of Rule 5(2) of Chapter III of Part VII of Bar Council of India Rules 1975 framed under the provisions of the Advocate Act of 1961. I, the undersigned, hereby applies for resumption of my practice as an advocate and furnishes the requisite particulars herebelow;

1. Full Name

   Surname _____

   Name _____

   Name of Father/Husband _____

2. Permanent Address _____

   _____

   _____

   Tel.No. _____ MOBILE _____

3. Present Address _____

   _____

4. Whether Permanent address given at the time of original enrolment is changed? _____

5. Date of Enrolment and Enrolment Number _____

6. Date of suspension of Sanad _____

7. Particulars of cause of resumption in details _____

   _____

   _____

   I am enclosing herewith documentary evidence in support of these particulars.

8. I am enclosing herewith by way of separate Bank Drafts of **Rs. 25,000/-** (Twenty Five Thousand only) drawn in favour of “Bar Council of Maharashtra and Goa” and Bank Draft of Rs. 100/- (One Hundred only) drawn in favour of “Bar Council of India” as fees for resumption.

9. I am filing herewith the affidavit as contemplated under Rule 5(3) of Chapter III of Part VII of said Rules.

10. Prior to suspension of my practice, I was member of the fund constituted under the Maharashtra Advocate Welfare Fund Act, 1981 and my Membership Number was _____

11. I have paid one time lifetime payment of Advocates Welfare Fund imposed by Rule-40 by the Bar Council of India rules on _____.

I enclose herewith Demand Draft of Rs. _____ /- (_____ only) by way of Lifetime contribution for the same fund. The said Demand Draft is drawn in favour of 'Bar Council of India Advocates Welfare Fund.' Payble at Mumbai

_____
Signature of Applicant

List of enclosures :

1. Bank Draft No. _____ (Rs. 25,000/-) in favour of Bar Council of Maharashtra & Goa Payble at Mumbai
2. Bank Draft No. _____ (Rs. 100/-) in favour of Bar Council of India Payble at Mumbai
3. Bank Draft No. _____ (Rs.) Under 'Bar Council of India Advocates Welfare Fund'. Payble at Mumbai

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Form of Affidavit

Affidavit

I, the undersigned (Surname) _____

(Name) _____

(Name of Father/Husband) _____

Age (in years) _____ Occupation _____

Resident of (full address) _____

_____

do hereby declare on solemn affirmation that, my enrollment certificate (Registration No. _____ date _____) was suspended on _____

the day _____ of year _____.

From the date of suspension till this day :

1. I have not been convicted of an offence involving moral turpitude; or
2. I have not been convicted of an offence under the provisions of the Un-touchability (Offences) Act 1955, or
3. I have not been dismissed or removed from employment or office under the State (defined under Article 12 of The Constitution of India) or
4. I have not incurred any disqualifications as laid down in section 24A of the Advocates Act of 1961.

Witnessing and declaring that all the statements made above are fully true and correct to the best of my personal knowledge, I put my hand here below in solemn affirmation thereof.

_____

Place :

Date :