

FORM VI
(See rule 22)

A. APPLICATION FORM FOR THE GRANT OF 'DEATH BENEFIT'

1. Name and address of the Applicant:
2. The relationship of the Applicant with the deceased Advocate:
3. The name and permanent address of the deceased Advocate:
4. The date of enrolment of the Deceased Advocate or State Roll No.:
5. Place or Places where the Deceased Advocate had actually Practised:
6. Whether the Deceased Advocate was a member of the Punjab Advocates Welfare Fund:
7. The number of members in the family depending upon the deceased Advocate and their respective relationship with the said Advocate; Furnish the names, ages, profession and addresses (by separate list) :
8. Average year income of the Advocate at the time of his death:
9. Sources of other income of the applicant and the extent thereof:
10. Whether the deceased Advocate had or the applicant has any movable or immovable Property, State the particulars thereof and the value thereof and any income derivable therefrom:
11. Whether the deceased Advocate has any Bank Account, if so, state the particulars thereof with the cash balance on the date of his death:
12. Whether the deceased Advocate had insured his life, if so, state the particulars of the insurance policy and the sum assured:
13. Any other particulars and information that the applicant desires to furnish:

I declare that the facts mentioned herein above are true and correct.

Place:

Date:

Signature of the Applicant

Enclosures required:

1. Death Certificate.
2. Recommendation of the Bar Association

Note:- Affix a Passport size photograph of the nominee/nominees at the top of the application.