Sr. No.:	
Dated:	

Bar Council of India Certificate and Place of Practice (Verification) Rules, 2015

FORM - A & FORM - F

(For advocates & Advocate on Records)

APPLICATION FOR ISSUANCE OF CERTIFICATE OF PRACTICE

	(see hale 8.3 b) the BCI Certificate	e ana Practice (verification) Rules, 2015)
To,		
Th	e Secretary,	Please affix
Ва	r Council of Punjab & Haryana	passport size
Lav	w Bhawan,	photograph of advocate.
Se	ctor 37-A, Chandigarh	of advocate.
Pir	n code: 160036	
Subject:	Application for issuance of Cert	ificate of Practice (P/).
Sir,		
I hereby ap Practice.	oply to the Bar Council of Punjab & H	aryana, Chandigarh for issuance of Certificate of
My full par	ticulars are as follows: -	,
1. 2. 3.	Enrollment Number on the Roll: Date of Enrollment: Name of the Advocate:	P/, (as given in the Enrollment Certificate)
4. 5.	Father's Name: Present Residential Address:	
6.	of the School/Board/College/Unive I. Matriculation / 10 th II. Graduation III. LL.B	y from where the advocate has done his/her (Name rsity & the Year of Passing) –

^{4.} form A & F made common vide resolution No. 305/2015 dated 5/12/2015

^{5.} Amended vide resolution No. 190/2015 dated 9/8/2015

Bar Council of India Certificate and Place of Practice (Verification) Rules, 2015

7.	Office Address with Telephone No.	
		,
	Mobile No., Email / website	
8.	Place of Practice:	(as given in the application form for Enrollment)
9.	Present Place of Practice:	
10.	Date of Birth:	
11.	Name of Bar Association of which applicant is a member:	
	*	,
12.		ment, has joined any Government/ Semi-Government or Private e, if so full particulars along with attested copies be furnished with
13.		ment, has joined any business, as a full partner/sleeping partner, if the an attested copy of business instruments like Partnership Deed,
14.		ment, has incurred any disqualification as mentioned in Section 24- ertified copy of judgement/order be attached:
15.		cing any disciplinary or criminal or contempt proceedings/convicted gs or not, if so, full particulars along with attested copies be given:
16.	Delay, if any, in submitting the appl	ication form, reasons to be given:
		,

17. Process fee/Late Fee/Penalty; Rs. 350/- (Rupees three hundred fifty only) by way of Bank Draft in favour of "Bar Council of Punjab & Haryana" payable at Chandigarh or QR CODE



BAR COUNCIL OF PUNJAB AND HARYANA **ADMINISTRATIVE**

LITED N.	,
UTR No.	
Dated	
Receipt No	
Dated	

	barco985552@barodampay	
18.	Place where the Advocate intends to cast his vote:	
	I. In Bar Council Elections	ī
	II. In Bar Association Elections.	
	Name of the Bar Association	
	Place	-
19.	Any other information applicant wants to submit about his distinctions.	
20.	0. If the advocate is not a member of any Bar Association (registered and recognized by the	
	concerned State Bar Council), the reason for not being a member of Bar Association:	
21.	Whether the advocate intends to become the Member of the Bar Association in future	
	mark):YesNo	
	I verify that the information/particulars furnished by me are true and correct to the	e best of my
know	ledge and nothing has been kept concealed therein. I am also submitting herewith Colu	mn-II and III
of this	s Form-A.	*
Date:	Full Signatur of the Advoc	
Note:	One additional passnart size photograph is attached/sout house.ith	

FORM - A

COLUMN - II

(See rule 8.4 of the BCI Certificate and Place of Practice (Verification) Rules, 2015)

Dat	red: Full signatures of the Declarant - Advocate
3.	That since my enrollment as an advocate, I have not switched over to any other profession/services/business and that thereafter, I am doing practice in law.
	This clause 2(II) shall not apply to those advocates who do not intend to be members of any Bar Association.
	(Name and Place of Bar Association)
	In the elections of the State Bar Council at In the elections of Bar Association
2.	That, I usually practice at and I intend to cast my vote: -
1.	That, after having obtained Certificate of Enrollment from the Bar Council of Punjab and Haryana under Section 22 of the Advocates Act, 1961, I have not left practice in law.
the	e roll of the Bar Council of Punjab and Haryana vide certificate of enrollment dated
	ageds/o or d/o or w/o

FORM - A

COLUMN - III (Certification)

(See rule 8.4 of the BCI Certificate and Place of Practice (Verification) Rules, 2015)

This is to see the second of t	
	is a bona-
	Association, if any) and he/she has been practicing
law since joining this Bar from the year	in the accompanying application are correct to my
Date:	
Full Signature with name of Authorized Member	Full Signature with name of of President/Secretary
Bar Council of Punjab & Haryana	Bar Association (with seal)
	should contain/attach the certified copies of at document/cause list establishing that the advocate ears.
If the advocate is attached with some with some Registered Law or Solicitor he/she shall furnish a certificate to that effect from the authorized officer of conc firm showing as to for what period candidate/advocate has served the firm and r of his/her details.	
	ver, he shall furnish 5 (five) such documents for last at he/she is conveyancing practice lawyer. ³

³ Inserted vide resolution no. 305/2015 dated 5/12/2015

Bar Council of India Certificate and Place of Practice (Verification) Rules, 2015

FORM - B

(for office use only) Bar Council of Punjab and Haryana

Passport size photograph of the advocate

Certificate of Practice

(issued under BCI Certificate and Place of Practice (Verification) Rules, 2015)

C.O.P. NO of	
This is to certify that Shri/Mr./Mrs./Ms	
s/o, w/o, d/o	
is an advocate enrolled in the Bar (Council of Punjab and Haryana, Chandigarh
His Enrollment Number is	dated
and his/her normal place of practice is	
He/She is entitled to cast his vote for the election	ce) and in the elections of Bar Association o
This certificate of practice is valid for a period of	5 years from the date of its issuance.
Date:	Chairman/Vice-Chairman Authorized signatory (Seal of the State Bar Council)