

MODEL PROFORMA

Single / DB

Senior Citizen

Age

CODING SHEET

High Court of Judicature at Madras

WRIT SIDE

(to be filled by the Registry)

Case Type No of Date of Filing
d d m m y y y y

S.R.No. Date of Presentation
d d m m y y y y

(To be filled by the Petitioner in Black Ink)

Petitioner _____

Respondent _____

Petitioner Counsel _____

Respondent Counsel _____

Subject Matter / Act

Subject / Category Code

Connected / Previous/
Covered case, if any Type No of

Passing Officer

Counsel for Petitioner

(To be filled by the Court Officer / PA concerned in Court itself in Red Ink)

Nature of Disposal _____ By _____

Date of Disposal
d d m m y y y y

Court Officer/PA

CODING SHEET

High Court of Judicature at Madras

CRIMINAL SIDE

(to be filled by the Registry)

Case Type No of Date of Filing

d	d	m	m	y	y	y	y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

S.R.No. Date of Presentation

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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(To be filled by the Appellant/Petitioner in Black Ink)

Previously filed Application, If any and Date of Disposal

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Appellant/Petitioner _____

Respondent/Respondent _____

Counsel for Appellant/ Petitioner _____

Counsel for Respondent _____

Subject Matter / Act

Subject / Category Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Connected / Previous/ Covered case, if any Type No of

Appellant in

Jail	Bail
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Lower Court Case Type No of

Date of Judgment

d	d	m	m	y	y	y	y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of the Lower Court and District

Crime No. of of _____ Police Station

In Cases of HCP

Name of the Detaining Authority: District Collector / Commissioner of Police

H.C.P.

Non-Statutory

 /

Statutory

Passing Officer _____ Counsel for Petitioner/Appellant

(To be filled by the Court Officer / PA concerned in Court itself in Red Ink)

Nature of Disposal _____ By _____

Date of Disposal

d	d	m	m	y	y	y	y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Court Officer / PA

CODING SHEET

High Court of Judicature at Madras

ORIGINAL SIDE

(to be filled by the Registry)

Case Type No of Date of Filing
d d m m y y y y

D.No. Date of Presentation
d d m m y y y y

(To be filled by the Plaintiff/Petitioner/Applicant in Black Ink)

Plaintiff/Petitioner/
Applicant _____

Defendant / Respondent
Contemner _____

Plaintiff/Petitioner/
Applicant Counsel _____

Defendant/Respondent/
Contemner Counsel _____

Value of the Suit Court Fee

Subject Matter / Act

Subject / Category Code

Connected / Previous/
Covered case, if any Type No of

Order Violated and Date
Of order (For Contempt
Petitions) Type No
d d m m y y y y

Passing Officer

Counsel for Plaintiff/Petitioner/Applicant

(To be filled by the Court Officer / PA concerned in Court itself in Red Ink)

Nature of Disposal _____ By _____

Date of Disposal
d d m m y y y y

Court Officer / PA

CODING SHEET

High Court of Judicature at Madras

APPELLATE SIDE

(to be filled by the Registry)

Case Type No of Date of Filing ^d^d^m^m^y^y^y^y

S.R.No. Date of Presentation ^d^d^m^m^y^y^y^y

(To be filled by the Appellant / Petitioner / Party in Person in Black Ink)

Caveat No. and Year, if any _____ Name of the Caveator Counsel _____

Petitioner / Appellant _____

Respondent/Respondent _____

Counsel for Petitioner/ Appellant _____

Counsel for Respondent _____

Value of the Appeal Rs. Court Fee Paid

Subject Matter / Act

Subject / Category Code Nature of Claim

Connected / Previous/ Covered case, if any Type No of

Lower Court Details

Trial Court : Type _____ No _____ Year _____
Date of Judgment _____

Lower Appellate Court : Type _____ No _____ Year _____
Date of Judgment _____

Passing Officer _____ Counsel for Appellant / Petitioner / Party in Person _____

(To be filled by the Court Officer / PA concerned in Court itself in Red Ink)

Nature of Disposal _____ By _____

Date of Disposal ^d^d^m^m^y^y^y^y

Court Officer / PA

Single / DB

Senior Citizen

Age

CODING SHEET

High Court of Judicature at Madras

WRIT SIDE / REVIEW APPLICATION

(to be filled by the Registry)

Case Type No of Date of Filing

d	d	m	m	y	y	y	y

S.R.No. Date of Presentation

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(To be filled by the Petitioner in Black Ink)

Petitioner _____

Respondent _____

Petitioner Counsel _____

Respondent Counsel _____

Subject Matter / Act

Subject / Category Code

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Order Sought to be Reviewed

Case Type _____ No _____ Year _____

Date of Judgment _____ By _____

Passing Officer

Counsel for Petitioner

(To be filled by the Court Officer / PA concerned in Court itself in Red Ink)

Nature of Disposal _____ By _____

Date of Disposal

d	d	m	m	y	y	y	y

Court Officer / PA

CODING SHEET

High Court of Judicature at Madras

ORIGINAL SIDE / REVIEW APPLICATION

(to be filled by the Registry)

Case Type No of Date of Filing

d	d	m	m	y	y	y	y

S.R.No. Date of Presentation

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(To be filled by the Petitioner in black ink)

Petitioner _____

Respondent _____

Petitioner Counsel _____

Respondent Counsel _____

Value of the Suit Court Fee

Subject Matter / Act

Subject / Category Code

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Order Sought to be Reviewed

Case Type _____ No _____ Year _____

Date of Judgment _____ By _____

Passing Officer _____ Counsel for Plaintiff/Petitioner/Applicant _____

(To be filled by the Court Officer / PA concerned in Court itself in Red Ink)

Nature of Disposal _____ By _____

Date of Disposal

d	d	m	m	y	y	y	y

Court Officer / PA

MODEL PROFORMA

Single / DB

Senior Citizen

CODING SHEET

Age

High Court of Judicature at Madras

APPELLATE SIDE/REVIEW APPLICATION

(to be filled by the Registry)

Case Type Rev. Appln No of Date of Filing

d	d	m	m	y	y	y	y

S.R.No. Date of Presentation

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(To be filled by the Counsel for Petitioner in Black Ink)

Caveat No. and Year, if any _____ Name of the Caveator Counsel _____

Petitioner _____

Respondent _____

Counsel for Petitioner _____

Counsel for Respondent _____

Subject Matter / Act

Subject / Category Code

--	--	--	--	--	--	--	--

 Value of Main Case

Court Fee Paid

Order Sought to be Reviewed

Case Type _____ No _____ Year _____

Date of Judgment _____ By _____

Passing Officer

Counsel for Petitioner / Petitioner

(To be filled by the Court Officer / PA concerned in Court itself in Red Ink)

Nature of Disposal _____ By _____

Date of Disposal

d	d	m	m	y	y	y	y

Court Officer / PA

MODEL PROFORMA

Single / DB

Senior Citizen

Age

CODING SHEET

High Court of Judicature at Madras

APPELLATE SIDE/CROSS OBJECTION

(to be filled by the Registry)

Case Type No of Date of Filing

S.R..No. Main Case No. of Date of Presentation

(To be filled by the Cross Objector in Black Ink)

Cross Objector/
Respondent _____

Respondent/Appellant _____

Counsel for Cross
Objector _____

Counsel for Respondent _____

Value of the Appeal Rs. Value of Cross Court Fee Paid
Objection

Subject Matter / Act

Subject / Category Code Date of Service
of Notice

Passing Officer _____ Counsel for Cross Objector / Cross Objector _____

(To be filled by the Court Officer / PA concerned in Court itself in Red Ink)

Nature of Disposal _____ By _____

Date of Disposal

Court Officer / PA

Single / DB

Model Proforma

Senior Citizen

CODING SHEET

Age

High Court of Judicature at Madras

CAVEAT – APPELLATE SIDE

(to be filled by the Registry)

Caveat No. Year Date of Filing

S.R.No . of Date of Presentation

(To be filled by the Caveator in Black Ink)

Applicant/
Respondent _____

Expected
Category _____

Caveator Counsel _____

Petitioner Counsel _____

Subject Matter / Act

Subject / Category Code

Connected / Previous/
Covered case, if any Type No of

Lower Court Details (In case of Appeals/Second Appeals/CRPs)

Trial Court : Ty _____ No _____ Year _____

Date of Judgment _____

Passing Officer

Caveator / Counsel for Caveator

MODEL PROFORMA

CODING SHEET

High Court of Judicature at Madras

CAVEAT – ORIGINAL SIDE

(to be filled by the Registry)

Single / DB

Senior Citizen

Age

Caveat No. Year Date of Filing

D..No . of Date of Presentation

(To be filled by the Caveator in Black Ink)

Applicant/
Respondent _____

Expected
Category _____

Caveator Counsel _____

Petitioner Counsel _____

Subject Matter / Act

Subject / Category Code

Connected / Previous/
Covered case, if any Type No of

Passing Officer

Caveator / Counsel for Caveator