## Application for Change of Name & Address

For office use only :- Receipt No	Date :
Change of Name Rs	Change of Address Rs
Remark :	



## <u>Bar Council of Alaharashtra & Goa</u> Tel (Off. ) – ( 022)- 22656567/22677508

To: The Secretary, Bar Council of Maha 2 <sup>nd</sup> Floor, P.W.D. Bu High Court, Fort, Mu	ilding,		
Sir / Madam,			
Please change my N	lame / Address as	s per application. My requisite part	iculars are as follows:-
Old Name ( in block letters)	Surname	Name	Name of Father / Husband
New Name			
( in block letters)	Surname	Name	Name of Father / Husband
Date of Enrolment:	<del>-</del>	Enrolment No.:- MAH /	<u></u>
Date of Birth :			
Old Add	lress :-		New Address :-

Kindly record the same accordingly. Thanking You,

Yours faithfully,

Tel.(Off.)\_

Signature of Advocate

## REQUIRED DOCUMENTS FOR CHANGE OF NAME

\_\_Tel.(Res.).:-\_

- 1. Marriage Certificate or copy of Government Gazette (duly attested).
- 2. Supporting affidavit for change of name on Stamp paper of Rs. 100/-.
- 3. Pay an amount of Rs.500/- (Rupees Five Hundred only) by DD / Cash as Charges for Change of
- 4. Pay an amount of Rs.100/- (Rupees One Hundred only) by DD / Cash as Charges for Change of Address.
- 5. Demand Draft should be in favour of "Bar Council of Maharashtra & Goa", Payable at Mumbai.