

**BEFORE THE CONSUMER DISPUTES REDRESSAL
COMMISSION NEW DELHI**

PROFORMA FOR FILING APPEALS

Sl. No.	APPEAL NO. _____ OF _____	
<u>1</u>	<u>Name & address of the Appellant with Telephone Number(s) and email.</u> Name : Address: Tel : Landline No: Mobile No : E-mail :-	
<u>2</u>	<u>Details of the Case filed before the State Commission.</u> Date of the Order: Case No. : Name of the State Commission:	
<u>3</u>	The date on which the free copy was received from the State Commission.	
<u>4</u>	Date on which a copy of the impugned order was received for the first time, from any source.	
<u>5</u>	The source and the mode of receiving the copy of the impugned order for the first time, from any source.	Through speed post
<u>6</u>	Delay if any, computing the period of limitation, from the date a copy of the impugned order was first received from any source.	Yes (Delay 2 days)
<u>7</u>	In case of delay, whether an application for condonation of delay in filing the Appeal is filed?	Yes
<u>8</u>	Nature of the consumer disputes involved. (To indicate the category)	Insurance
<u>9</u>	Details of the connected Appeal(s) or Revision Petition (s) if any.	N/A
<u>10</u>	Details of any pending petition/appeal, involving identical question of law, if any.	N/A
<u>11</u>	If the consumer dispute relates to a	

	housing, or land development project, details of the pending First Appeal/Revision, if any, in respect of the same project.	N/A
<u>12</u>	Whether attested true copies of the impugned order, pleadings and evidence (oral, affidavits as well as documentary) filed before the State Commission are filed?	Yes
<u>13</u>	Whether English translations of all the documents in vernacular, are filed?	N/A
<u>14</u>	Telephone no. (Landline as well as mobile), and email address of the Respondent (s), if available.	N/A
<u>15</u>	Name, address, telephone nos. (Landline as well as mobile) and email address of the advocate of the Appellant.	
<u>16</u>	Details of the Demand Draft submitted towards Statutory Deposit, if any, as per the requirement of Sec.19 of the C.P. Act.	

Verification:

I, the Appellant above mentioned, do hereby verify that the information provided herein above is true and complete in all respects, and nothing material has been concealed therefrom.

**Signature of the Appellant / Counsel /
Authorised Representative**