VAKALATNAMA

In the Court of [Court Name]

[Case Type] No. [Case Number]/[Year]

Parties

[Plaintiff/Petitioner/Appellant Name(s)]

Son/Daughter/Wife of [Father/Husband Name] Resident of [Full Address]

VERSUS

[Defendant/Respondent Name(s)]

Son/Daughter/Wife of [Father/Husband Name] Resident of [Full Address]

Authorization

KNOW ALL MEN by these presents that I/We, the above-named [Plaintiff/Petitioner/Appellant], do hereby appoint [Advocate's Full Name], Advocate (Enrollment No. [_____]), with office at [Advocate's Office Address], as my/our Advocate to appear, plead, and act for me/us in the above-noted case and all matters incidental thereto.

Powers and Authority

I/We authorize the said Advocate to:

- Appear, plead, and conduct the case in this Court and any other Court or forum where the case may be transferred, including appellate Courts;
- File, sign, verify, and present pleadings, petitions, affidavits, appeals, execution applications, interlocutory applications, and other necessary documents;
- Admit or deny documents of the opposite party, take back documents, and apply for certified copies;
- Withdraw, compromise, or settle the matter or refer it to arbitration, if permitted;
- Deposit, draw, and receive money on my/our behalf and grant receipts and discharges;
- Appoint junior Advocates or substitute Advocates as deemed necessary;
- Conduct cross-examination of witnesses and produce evidence;
- Act generally in all matters relating to the case as if I/We were personally present.

Binding Effect

All acts done by the said Advocate or any substitute Advocate shall be binding upon me/us. I/We undertake to appear in Court when required and shall keep the Advocate informed of any developments.

Execution
Signed at: [Place]
Date: [Day] day of [Month], [Year]
Client(s) Signature(s)/Thumb Impression:
Signature:
Name (Print):
Witness (if required):
I identify the above signature/thumb impression to be genuine.
Witness Name:
Witness Signature:
Advocate's Acceptance
I accept the above authority subject to the terms of fees and professional conduct rules.
Advocate Name (Print):
Enrollment Number:
Advocate Signature:
Bar Council:
Date:
Office Address:

Important Notes

- Affix court-fee stamp and Advocate Welfare Fund stamp as required by your state/High Court.
- Verify stamp values with your local District Court registry or High Court website before filing.
- Customize powers granted based on client instructions (e.g., limit compromise authority, restrict withdrawal).
- For Supreme Court cases, use the Supreme Court-specific Vakalatnama format.
- For tribunal/appellate cases, follow the respective body's prescribed format.

- Retain a copy for client records; file original with the Court.
- Different courts may have specific additional requirements—consult your local court registry.

Variations by Court Type

District/Subordinate Court

Standard format as above applies. Ensure stamp and registration as per State Court Fees Act.

High Court

Powers may include broader appellate authority. Enclose certified copy of Court of First Instance vakalatnama if continuing representation.

Supreme Court

Use official Supreme Court form if mandated. Include specific case number and counsel details as per Supreme Court website.

Tribunals (NCLAT, APTEL, etc.)

Follow tribunal-specific form or format. Refer to tribunal's e-filing portal for requirements.

References

- [1] The Code of Civil Procedure, 1908 Order XLVI (Authority of Advocate)
- [2] E-Courts India Portal Vakalatnama Forms & Templates. https://ecourts.gov.in
- [3] Supreme Court of India Vakalatnama Format. https://sci.gov.in
- [4] State Court Fees Acts and Amendments Check your respective state for stamp requirements.