

## FORM 'B'

[see rule 7]

**APPLICATION TO ADJUDICATING OFFICER**

(Claim for compensation under section 31 read with section 71 of the Act )

(see rule 7)

For use of Authority(s) office :

Date of filing : .....

Date of receipt by post : .....

Complaint No. : .....

Signature : .....

Authorized Officer : .....

Between

..... Applicant(s)

And

..... Respondent(s)

Details of claim :

## 1. Particulars of the applicant(s) :

(i) Name of the applicant :

(ii) Address of the existing office / residence of the applicant :

(iii) Address for service of all notices :

(iv) Details of allottees apartment, plot or building

## 2. Particulars of the respondents :

(i) Name(s) of respondent :

(ii) Office address of the respondent :

(iii) Address for service of all notices :

(iv) Registration No. and address of project :

## 3. (a) Jurisdiction of the Adjudicating Officer :

The applicant declares that the subject matter of the claim falls within the jurisdiction of the adjudicating officer.

(b) Project Registration No.

## 4. Facts of the case :

(give a concise statement of facts and grounds of claim against the respondent)

## 5. Compensation(s) sought :

In view of the facts mentioned in paragraph 4 above, the applicant prays for the following compensation(s) .....

[Specify below the compensation(s) claimed explaining the grounds of claim(s) and the legal provisions (if any) relied upon]

## 6. Claim not pending with any other court, etc. :

The applicant further declares that the matter regarding which this application has been made is not pending before any Court of Law or any other Authority or any other Tribunal(s).

7. Particulars of the fee in terms of sub-rule A (1) of rule 7 :
  - (i) Amount
  - (ii) Mode
8. List of enclosures :  
(Specify the details of enclosures with the application)

*Verification*

I ..... (name in full block letters) son /daughter of .....  
the applicant do hereby verify that the contents of paragraphs (1 to 8) are true to my personal  
knowledge and belief and that I have not suppressed any material fact(s).

Place :

Date :

Signature of the applicant(s)