## APPLICATION FOR CHANGE OF NAME

## ANNEXURE-1

TO THE DISTRICT MAGISTRATE
ADDITIONAL DISTRICT MAGISTRATE
EXECUTIVE MAGISTRATE.
<del></del>
Sir,
1. I (existing full name of the person concerned in block letters) of (here insert his full present address showing door No. locality, Village or town or city, Police Station. Talul and District) was born at and am a Citizen of India.
2. My age on the date of application is)date of birth in the Christian era and age.
3.My father's full name is/was : (in block letters)
4. My mother's full name is/was : (in block letters)
5.I am single/married/a widow/widower/a divorce:
6. My Wife's /husband's full name is was:
7. Marks of identification: (1)
<ul><li>(2)</li><li>8. Occupation:</li><li>9. I am in the service of State Government of the Government of India (State the name of the Government designation and date of his appointment)</li></ul>
10.Profession or occupation other than Government Services (here state details regarding designation, name and address of employer, station of posting etc):

- 11. I intend to change my existing name as: (full name in block letters)
- 12. I. A.S do solemnly and sincerely declare that the foregoing particulars stated in this application on are true and make this solemn declaration conscientiously believing the same to be true.

Signature of the applicant.

Enclosure: Affidavit

On Rs. 10/- non-judicial stamp paper (or Affix Spl. Adhesive stamp)

Certificate of character & antecedents from the concerned police station.

## **AFFIDAVIT**

I	S/o,D/o,W/o	age
years, R/o H.No.	, Locality	mandal,
	reby solemnly affirm and st	
I am resident of	District since	years. My original name
is (strike off whichever is not appl	and I intend to change n	ny name /My children's name
(strike off whichever is not appl	licable) as	
For the following reasons		
In this regard, I state that I have that I am not involved in any enclose herewith a certificate	y litigation Civil or Crimina	l cases. To prove the same I
The above facts are true and co any event my above statement same and action may be taken a	is proved to be false, I w	ill be held responsible for the
		DEPONENT
Sworn and signed before me onday ofmonth year atplace.		
NOTARY		