

FORM - D

(APPLICATION FORM FOR DIVORCE REGISTRATION)

UNION ADMINISTRATION _____ (NO. _____)

TOWN / TEHSIL _____ DISTRICT _____

Mode of Divorce

Talaq

Khula

Other

Husband's Name: _____ شوہر کا نام: 1.
CNIC No. _____ شناختی کارڈ نمبر: 2.
Father's Name with CNIC No. _____ والد کا نام و شناختی کارڈ نمبر: 3.
Address: _____ پتہ: 4.
Wife's Name _____ بیوی کا نام: 5.
CNIC No. _____ شناختی کارڈ نمبر: 6.
Father's Name with CNIC No. _____ والد کا نام و شناختی کارڈ نمبر: 7.
Address: _____ پتہ: 8.
Date & Place of Marriage: _____ نکاح کی تاریخ / جگہ: 9.
Total No. of Children from Wedlock: _____ رشتہ ازدواجی میں بچوں کی کل تعداد: 10.
Date of Divorce Pronouncement/Notice: _____ تاریخ اعلان / نوٹس طلاق: 11.
Authority granting Divorce: _____ اتھارٹی برائے عطاء طلاق: 12.
Details Regarding the Divorce and _____ تفصیل نسبت طلاق و کفالت اولاد: 13.
custody of the Children: _____
No. of previous divorces of Husband: _____ شوہر کی گزشتہ طلاقوں کی تعداد: 14.
No. of previous divorces of Wife: _____ بیوی کی گزشتہ طلاقوں کی تعداد: 15.
Details of Proceedings of the Arbitration _____ ثالثی کمیٹی کی کارروائی کی تفصیل: 16.
Council: _____
Conciliation Proceedings Failure Date: _____ تاریخ ناکامی ثالثی: 17.
Date of Effectiveness of Divorce: _____ تاریخ موثر طلاق: 18.
Date of Registration: _____ تاریخ اندارج: 19.
Verified By: _____ تصدیق کنندہ: 20.

THE ENTRY OF THE SAID DATE IS ACCORDING TO THE STATEMENT FURNISHED BY THE INFORMING PERSON / INSTITUTION

This extract to Mr. Mrs. _____ has been issued vide application dated _____

Rs. _____ regarding fees for the registration / extract has been received vide receipt No. _____ Book No. _____

Entry No. _____ Dated: _____

Registrar (Signed)

Birth, Deaths Marriages and Divorces

Union Administration _____ (No. _____) District: _____

CRMS No. _____

Checked By: _____
(Name & Signatures)

Date of Issuance: _____