

“COMPLAINT PROFARMA”

BEFORE THE BAR COUNCIL OF ANDHRA PRADESH, AMARAVATI

S.R. No. of 20

Between : (Name of the complainant/s with full and clear address)

_____ **...Complainant /
Petitioner**

AND

(Name of the Advocate/s with full & clear address)

(Along with State Roll. No of the advocate ())

_____ **...Respondent.**

PETITION FILED UNDER SEC.35 OF THE ADVOCATES ACT, 1961

(Describe the brief facts of the case para wise)

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Place :

Date :

Signature of the Petitioner /Complainant.

Verification :

I, _____ (S/o. W/o. D/o.) _____
complainant herein, do hereby solemnly affirm and state that the
contents of the Para(s) _____ to _____ of the petition
are quite true and correct to the best of my knowledge, belief and
information. Hence, verified and signed on this to the _____
day of _____ at _____.

Signature of the Petitioner /Complainant.

Enclosures :-

(Enclose the valid proofs)

1. _____

2. _____

3. _____

Note :-

**(Fill the complaint in the above prescribed format. Don't fill it up or
make it Xerox)**

BAR COUNCIL OF STATE OF ANDHRA PRADESH : AMARAVATI

PROCEDURE FOR FILING COMPLAINT AGAINST ADVOCATE

- 1) A complaint against an advocate shall be in the form of a petition dully signed on every page and verified as required under the code of civil procedure – 1908.
- 2) A complaint should be filed in English or Telugu., If the complaint is filed in Telugu, English translation of the same has to be filed as earlier as possible.
- 3) The complaint should make precise, concise, legible and specific charges of mis-conduct against the respondent – Advocate. You should not implead persons who are not advocates as respondents in the complaint.
- 4) Fees : Every complaint shall be accompanied by a fee of Rs.1500/- by the way of Demand Draft drawn in favour of “BAR COUNCIL ANDHRA PRADESH, AMARAVATI”, payable at Amaravati. If there are more than one advocate – respondents, as many additional copies + Rs.100/- extra for each respondent has to be paid.
- 5) The complaint should be in the form of a verified petition specifying the correct initials, name and full residential address and office address of the Advocate to ensure speedy and positive service of notice of the complaint to the advocate.
- 6) The complaint should be filed in 1+2 copies preferably typed on ledger paper (1st copy) & in A4 size.
- 7) The complaint can be filed either in person or sent by post to the following address :
- 8) A soft copy of the complaint in MS-Word format, be sent to the mail id : secapbc@gmail.com

**Secretary,
Bar Council of Andhra Pradesh,
Ground floor,
A.P. High Court Building,
Nelapadu,
AMARAVATI -522 239
Andhra Pradesh**

SECRETARY, BAR COUNCIL