

FORM-D

(APPLICATION FORM FOR DIVORCE REGISTRATION) UNION ADMINISTRATION______(NO.____) TOWN /TEHSIL ______DISTRICT_____



Mode of Divorce Talaq	Khula Other
Husband Name	1۔ شو پر کا نام
CNIC NO	
Father's Name	3
Address	
Wife Name	
CNIC NO	
Father's Name	
Address	
Date & Palace of Marriage	
Total No of Children from Wedlock	10۔ رشتہ ازداجگی میں بچوں کی تعداد
Date of Divorce Pronouncement / Notice	11۔ تاریخ اعلان انوٹس طلاق
Authority granting Divorce	
Details Regarding the Divorce and	
custody of Childern	
No of Previous divorces of Husband	
No of Previous divorces of Wife	15۔ بیوی کی گزشته طلاقوں کی تعداد
Details of Proceeding of the Arbitration	
Council	
Conciliation Proceeding Failure Date	- 17۔ تاریخ ناکامی ثالثی
Date of Effective of Divorce	18۔ تاریخ موئٹرطلاق
Date of Registration	
Verified By	
THE ENTRY OF THE SAID DATE IS ACCORDING TO THE STATEMENT F This extract to Mr. Mrs has been issued vide a for the registration /extract has been received vide receipt no Dated REGISTRAR (Signed) Birth Deaths Marriages and Divorces Union Administration (No) Districr CRMS No:	URNISHED BY THE INFORMING PERSON/ INSTITUTION