

APPLICATION FOR VERIFICATION OF AFFIDAVIT FILE

To, DHAQ

"I" (Seller) Mr. _____ CNIC No _____

R/o _____

Mob # _____ holder of File No _____ Case Code _____

visited DHAQ office Quetta Isb / Lhr / Kci/Pwr/Fsl at hrs on _____ 2024 along with (Buyer)

Mr. _____ CNIC No _____

Mob # _____ I requested DHAQ authorities for verification of said file. I declare and undertake that in the event of file being disclosed as fake, I will fully cooperate with the DHAQ office for legal course which they might adopt to bring the culprits (involved in producing and selling of fake file of DHAQ to justice. I am _____ of the file.

(Buyer / Seller)

Signature / thumb of Applicant

Witness

Name: _____

S/D/O: _____

CNIC No: _____

Sign: _____

Property Dealer

Name: _____

S/D/O: _____

CNIC No: _____

Sign: _____

FOR OFFICE USE ONLY

Voucher No: _____

Dated: _____ Time _____

Verification: Verified _____ / Fake _____
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Sign Supr: _____ Sign Mngr: _____ Sign DD: _____

Sign Dir: _____