AFFIDAVIT(S) OF BENEFICIARIES OF WILL

	I/We		Son	/Wife/Daughter of
	and declare as unde	Resident of: r:-	d	o hereby solemnly affirm
1.	Dwelling Unit No		, was a Sector	allotted/ transferred , Chandigarh vide letter
2.	No, dated _ That Late Sh./Smt behind the following	t		on, leaving
Sr. No.	Name of the Legal Heirs	Age (years)	W Relation with Deceased	sban £atest Address
1				
3				
4				
5				
6				
3. 4. 5.	That the mother of the deceased is(Alive/Problemsed/Deceased). That the name of all the legal heirs of the deceased have been mentioned above and no other legal heir(s) have been left out and their address(es) indicated above an also true and correct. That the said deceased had executed a Registered Will duly registered at Sub-			
	Registerar Office, he/she had beq	a ueathed t	t S. Nodat he said property/plot	ed in which /house in favour of
6. 7.	cancelled till date an That I/we hereby un property mentioned Development and Re	d I/We shal dertake to j above and egulation Ad	I comply with the stipulat pay all sums due in conne to abide by the provision ct, 1952 and rules frame	ection with the above said s of the capital of Punjab d there under. I/We shall
8.			ntioned in the allotment le nade in the property.	tters as well.
9.			ng in any court of law rega	rding this property.
10.	That the property is f	ree from all	sorts of encumbrances i.e	
11	of Bank(s)/Financial			
11.	That My/Our Specin	nen Signatu	re are as under:-	
Place Date:	: Chandigarh			Deponent(s)

Verification:

I/We, the above named deponent do hereby verify that the application is correct to the best of my/our knowledge and belief and nothing has been concealed therein. In case of any concealment or misrepresentation in the aforesaid affidavit is found at any stage then legal action may be taken against me/us under Section 182 IPC, Section 415 read with Section 417 & 420, as the case may be.

Place: Chandigarh	Deponent(s
Date:	