

Particulars to be furnished by an Advocate applying for engagement as Special Public Prosecutors

1. Name of the person
2. Permanent Account No.
3. Father's Name
4. Date of Birth
5. Address :- (i) Residence :
(ii) Office:
6. Telephone, Mobile Number and E-mail ID
7. * Educational Qualification
8. * Date of Enrolment as an Advocate in the State Bar Council and Registration No.
9. If a partner in a firm, name(s) of the firm(s) and other partners
10. Number of criminal cases dealt with during last five years as an Advocate
11. Brief particulars of experience in handling prosecution cases under Direct Taxes
12. Income from professional practice (copy of the latest IT Return to be attached)

Verification

I _____, S/o/D/o/W/o _____ do hereby declare that whatever has been stated in the above application is true to the best of my knowledge and belief.

Signature

DATE:

PLACE:

*** Applicant to submit documentary proof with respect to aforesaid items / information**

Undertaking

I, S/o/D/o/W/o do hereby declare that if engaged by the Department, I shall fully abide by the terms and conditions of the engagement.

Signature

Date:

Place:

ANNUAL PERFORMANCE APPRAISAL OF SPECIAL PUBLIC PROSECUTOR FOR THE FINANCIAL YEAR _____	
PART-I	
Name of the Pr. CCIT /CCIT Region / Pr. CIT/CIT Charge	
Name of the Special Public Prosecutor	
Date of Birth	
Date of Engagement	
PART-II	
PERFORMANCE REPORT	
Complaints handled during the period under review	
1	No. of cases handled by the SPP (list of cases to be enclosed)
2	Cases decided in favour of the Department
3	Cases decided against the Department
4	Complaints Quashed by Hon'ble High Court
5	Offences Compounded by the Department
6	Cases closed by the Court
7	Cases adjourned Sin-a-die
PART- III	
Comments of the Pr.CIT/Pr.DIT/CIT/DIT on the performance of the SPP	
Pr. Commissioner of Income Tax/ Commissioner of Income Tax	
Review of the performance by the Pr. CCIT/CCIT	
Whether the performance is found satisfactory	YES/ NO
Pr. Chief Commissioner of Income Tax/ Chief Commissioner of Income Tax	

NOTE:

Part-I and Part-II of the pro forma are to be filled by the SPP. Part-II should be verified by the respective Pr.CsIT/Pr.DsIT/CsIT/DsIT before offering their comments on the performance.

PERFORMANCE APPRAISAL OF SPECIAL PUBLIC PROSECUTOR FOR THE PERIOD _____ (To be sent at the time of renewal of term of engagement)	
PROFORMA	
PART-I	
1. Pr. CCIT/CCIT Region	
2. Name of the Special Public Prosecutor	
3. Date of Birth	
4. Date of First Engagement	
5. Date of expiry of existing Tenure (Board's reference No. by which last Renewal was sanctioned should be specified)	
PART-II	
PERFORMANCE REPORT	
1. No. of cases handled by the SPP	
2. Cases decided in favour of the Department	
3. Cases decided against the Department	
4. Complaints Quashed by Hon'ble High Court	
5. Offences Compounded by the Department	
6. Cases closed by the Court	
7. Cases adjourned Sin-a-die	
PART-III	
1. Does the SPP take interest in his work and generally alert in the Department's interest in various litigation entrusted to him	
2. Specific comments should be given about the promptness in:	
2.1. Informing the Department from time to time regarding hearing of Cases, supply of copies of Judgment etc.	
2.2. Taking steps for Vacation/Variation of stay	
3. Whether the Pr.CCIT/CCIT satisfied with the performance of the SPP? If no, the instances may be indicated.	
4. Whether continuance is recommended? If so, for what period?	

Pr. CHIEF COMMISSIONER OF INCOME TAX/ CHIEF COMMISSIONER OF INCOME TAX

PROFORMA 'P4'

Bill for claim of professional fees by Special Public Prosecutors (case wise) to be submitted to the Pr.CIT /CIT concerned/CIT (J)

PRE-RECEIPTED

1.	Name of the SPP	
2.	Pr.CIT/CIT Charge	
3.	Circle/Ward	
4.	Name of the accused	
5.	Asst. Yr.	
6.	Section(s) of the Act involved	
7.	Case Title	
8.	Dates and amount of bills earlier claimed in this case	

PART A (Bill for Drafting), as applicable

(Amount in Rs.)

1.	Complaints	
2.	Revisions, replies, written arguments etc.	
3.	Written opinion	
	Total	

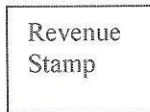
PART B (Bill for appearance etc.), as applicable

(Amount in Rs.)

1.	Substantial and effective hearing (Whether Connected case- Yes / No)	
2.	Non-effective hearing	
3.	Conference fees	
4.	Clerkage @ 10%	
5.	Out of pocket expenses (particulars to be given)	
6.	For performing duties outside headquarters (as per para 3.4)	
	Total	

Certified that the above information is correct and in accordance with the terms of engagement. The above claims have not been made earlier.

Received Payment



Signature and Name
Of Special Public Prosecutor
Mobile/Tel. No.

For office use only

Total Bill

Part A	
Part B	
Total Amount claimed	
Deductions, if any*	
Amount passed for payment	

*The SPP shall be intimated of the deductions made before payment of the bill.

Signature and Name of the D.D.O.