Affidavit

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| --- | --- | --- | --- | --- | --- |
| **S.No.** | **Name** | **Relationship** | **Date of Birth** | **Age** | **Adhaar Card No.** |
| **1** |  | Father  |  |  |  |
| **2** |  | Mother |  |  |  |
| **3** |  | Wife |  |  |  |
| **4** |  | Son |  |  |  |
| **5** |  | Daughter |  |  |  |

all residing at ­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, PO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Tehsil:\_\_\_\_\_\_\_\_\_\_\_, District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Pin No.\_\_\_\_\_\_\_\_\_\_\_\_- State\_\_\_\_\_\_\_\_\_\_ -India being the legal heirs of late**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, holding Passport No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and Iqama No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_who passed away on / / corresponding to / / (H) in a traffic accident in the Kingdom of Saudi Arabia do hereby appoint and authorize HE, the Ambassador of India Kingdom of Saudi Arabia to do the followings:

1. To appoint and retain anyone from among the lawyers on the panel of Indian Embassy to follow up our Death Compensation case and finalize it legally and receive on our behalf the blood money.

1. We have also no objection towards deduction of 10-20% of total Death Compensation amount as lawyer fee, after settlement of our claim.
2. In witness, we have executed the Power of Attorney on the day / 2025 in the presence of:

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| **Witness names and their signatures** **1-** **2-**  | **Executants name and their signature/Thumb****(All the legal heirs of the deceased)** |