Form 26 APPLICATION FOR RECORDS OF CRIMINAL PROCEEDINGS FOR NON-ICMS CASES

	APPLICATION FOR RECORDS OF CRIM	INAL PROCE	EDINGS FOR NON-ICMS CASES		
Name of Applicant / Solicitor's Firm	·			Date of Application	
NRIC No.				Solicitor Acting For :- (✓ where applicable)	
				☐ Complainant	
Address	:			□ Respondent	
				□ Others:	
File Reference No:	Email:			(please specify)	
Telephone No:	Facsimile No:				
DOCUMENTS APPLIED FOR					
CRIMINAL COURTS CLUSTER					
NRIC/ Name of Accused / Complainant / R	esnondent / Deceased:				
Mino Maine of Accused / Complainant / N	coponacity becoused.				
Case No:					
(Please specify Case Reference No.)					
DAC/MAC No(s):					
Coroner's Inquiry No:					
Others:					
Type of Document (✓ where applicable)					
☐ Charges					
☐ Complaint Form					
□ Notes of Evidence:					
(please specify Registrar's Certificate	/ hearing dates)				
☐ Statement of Facts					
□ Others:					
(please specify,	1				
Reasons For Application (where applica	ble)				
☐ Misplaced Original Copy of the Order/C	Charge/Others	□ T	o seek legal advice/ representation	1	
		- 0	thers :		
☐ For reference		- 0			
		 (pi	ease specify)		
(1) I understand that I am to pay the require 2013 or paragraph 3 of the Fees (State	ed fees for the above in accordance with region of the courts - Criminal Jurisdiction of the courts - Crimin	ulation 2(1)(a) as applicable	(ii), (1)(b) and (2) of the Criminal I	Procedure Code (Prescribed Fees) Regulations Form. I also understand that the document(s)	
applied for can only be collected after the	he stipulated payment has been made.			• •	
• •	approval of the application, will only release the	•			
thereof. I also understand that I am req	ill be deemed as lapsed if the document(s) apuired to provide a Letter of Authorisation for	pplied for is/are or another pers	on to collect the requested docum	ent(s) on my behalf if I am unable to collect them	
personally.					
Signature of Applicant				ate	
Signature of Applicant				ale	
FOR OFFICIAL USE ONLY The application is: Approved Not approved					
(where applicable) Reasons for rejection (where applicable):					
_					
Name and Signature of District Judge/Magistra	nte/Deputy Registrar	N= -63	umanta calla -tt-	No of Dorson	
Total Fees payable : Minimum Fees payable (\$15 x no. of do.)	ocument types applied):	INO. OT GOC	uments collected:	No. of Pages:	
	eipt No:	Document	(s) collected by:		
- Balance Fees payable (\$0.50 per page	, where applicable):		ignature of Collector sport/ FIN No:		
- Paid on: Rece	eipt No:	Doto:	SPOTE FIN INU.		

Collection Time: Mondays to Fridays - 9.00 am to 1:00pm & 2.00pm to 5.00pm

- All requests for copies of the records of any criminal proceedings are subject to the approval of the court.
- 2. Once the request has been approved and the applicant has been informed on the availability of the requested document(s) and the cost (where applicable), the said documents will be available for collection for a period of 21 days. Any document(s) not collected within the stipulated period will be destroyed and a fresh request must be submitted thereafter if the applicant still requires the document(s).
- 3. An application for copies of the records of any criminal proceedings will only be processed after the stipulated payment has been made.

Prescribed Fees

4. The fees payable are as follows:

Document Type	Fee Amount	Remarks
Registrar's Certificate ²	\$20	Payable upon Application
All other documents (including a copy of any Judgment, Sentence, Order, Deposition or other part of the record of any criminal proceedings ³	\$5 for each type of document requested in the application and \$0.50 per page thereof, subject to a minimum of \$15 per document.	Minimum of \$15 (per document) payable upon Application *Any additional amount (based on number of pages) may be payable before collection of the document(s).
Application for an additional copy of the record of any criminal proceedings or the Grounds of Decision ⁴	\$0.50 for each page thereof, subject to a minimum of \$10 for each copy of the record of proceedings and grounds of decision	Minimum of \$10 (per document) payable upon Application *Any additional amount (based on number of pages) may be payable before collection of the document(s).

- 5. There is a \$5 non-refundable application fee for each type of document applied for. A fee of \$0.50 for each page of the document, subject to a minimum fee of \$15 for each type of document requested is also payable. The total sum of \$15 is payable when the application for the records is submitted.
- 6. The additional amount of fee (based on the actual number of pages provided) is payable before the document(s) can be collected.

Refund of Fees Paid

- 7. The \$5 application fee is non-refundable.
- 8. A refund of the minimum fee already collected will only be made through directly crediting the applicant's bank account. The applicant must furnish the photocopies of the following:
 - a. applicant's NRIC or Passport; and
 - b. applicant's bank statement or savings passbook (reflecting his name and the account number)

Payment Modes

9. Local Applicants: Cash, NETS or local Solicitor's cheque

[For cheque payment, please make the cheque payable to "Registrar, State Courts" and indicate the Case

Number at the back of the cheque]

10. Overseas Applicants: Bank Draft in Singapore Currency (payable to Registrar, State Courts)

Payment should also include all bank charges

Contact Us

For enquiries pertaining to court records, please email us at contact@statecourts.gov.sg or call us at (65) 6587 8423 for assistance.

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² Pursuant to section 45A(4) of the Evidence Act (Cap. 97).

³ Pursuant to paragraph 3 of the Fees (State Courts – Criminal Jurisdiction) Order 2014, and regulation 2(2) of the Criminal Procedure Code (Prescribed Fees) Regulations 2013, read with section 426(1) of the Criminal Procedure Code (Cap. 68).

Pursuant to regulation 2(1)(b) of the Criminal Procedure Code (Prescribed Fees) Regulations 2013, read with section 377(6) of the Criminal Procedure Code (Cap. 68).

Form 27

MENTION SLIP

Case No.:	
PIC/DAC/MAC/PS	
Solicitor's Name /	
Prosecutor's Name	
Telephone No.:	
Fax No.:	
Name of Accused / Party he represents:	1.
	2.
	3.
Accused on bail/ Remanded at *	

^{*}indicate place of remand