## Appendix IV

Subject: Study regarding implementation of Habitual Offenders Act in States/U. Ts

## Questionnaire

- 1. Name of the State:
- 2. Total Number of Habitual (a) 1973 Offendenders in your State
  - (b) 1974
    - (c) 1975

- 1. Sl. No.
- 2. Name of the habitual offender.
- 3. Various IPC crimes committed.
- 4. No. of times convicted/prosecuted.
- 5. Whether any register for maintaining records of the offenders are maintained?
- 6. Whether any notice was served to the offender to appear before D.M. or any other officer appointed by him to furnish information about finger print, palm impression, foot print, photographs etc.
- 7. Whether he appeared or did not appear before D.M. on the notice served to him for furnishing information regarding fingerprint plam impression, foot print & photographs etc. (if not please state the action taken).
- 8. Whether any show cause notice was served to him to prove himself for not being habitual offender?
- 9. Whether he intimated his absence for his ordinary residence or intended change or residence to D M/Supdt. of Police (If yes, please indicate the number of times).
- 10. For how many times he was found missing from his ordinary residence? (Please state the action taken also).
- 11. Whether his movement was restricted: (If yes, please state the period).
- 12. Whether any direction was issued from D.M /Supdt. of Police for his reporting to their offices once in a month or more frequently? For how many times he reported?

Appendix 125

13. What practice is adopted in your state, if a offender goes out of the state? Whether any intimation for the change of his address is intimated to the IG of the other State (Please state the actual practice).

- 14. Whether he was sent to corrective settlement?
- 15. Whether he was transferred/discharged from one corrective settlement to an other settlement for the violation of the act?
- 16. Whether he was again sent to corrective settlement for violation of the Act?
- 17. Whether he was found outside the corrective settlement or restricted area (Please state number of time and action taken).
- 18. Whether after completion of his tenure he was required for registration?
- 19. Whether he again committed offence? (if yes, state number of times).
- 20. Whether his order for movement was cancelled after due consideration.
- 21. Whether there is any provision of Domiciliary check up under the Habitual Offenders Act? (If not what difficulties have been experienced in your state in the absence of this provision under the Habitual Offenders Act? (cite cases and give details on separate sheet).
- 22. Whether addition of the domiciliary check up under the habitual offenders Act will enable smooth enforcement of the act? (Please give your opinion)
- 23. What is your opinion if the provision of the domiciliary check up is included in the Habitual Offenders Act of your state?
- 24. Any other suggestion.