



VISA APPLICATION FORM

GIVEN NAME: ANISA		FAMILY NAME: NARIMAN	
FATHER'S NAME: DARAYUS		MOTHER'S NAME: JYOTI NARIMAN	
DATE OF BIRTH: 28/03/1984	PLACE OF BIRTH: NEW DELHI	CURRENT NATIONALITY: INDIAN	OTHER NATIONALITY:
GENDER: <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE	MARITAL STATUS: <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW		RELIGION: PARSI
CONTACT NUMBER: +91-7703934380		PERMANENT ADDRESS: 127A CENTRAL AVENUE SAINIK FARMS	
EMAIL: ANISANARIMAN@GMAIL.COM		CURRENT ADDRESS:	
DESIGNATION: CHEF	COMPANY NAME: WILDERFOODS PVT. LTD	ADDRESS OF COMPANY/ EMPLOYER: SELF EMPLOYED	
TYPE OF TRAVEL DOCUMENT:			
<input checked="" type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.: 25830270	DATE OF ISSUE: 31/12/2019	DATE OF EXPIRY: 30/12/2029	PLACE OF ISSUE: NEW DELHI
ADDRESS DURING YOUR STAY IN LEBANON: 1ST FLOOR MAATOUK BUILDING, ZOYK MOSBEH RESERVAN, MOUNT LEBANON			
NAME OF REFERENCE IN LEBANON: AMIR ALKAI		ADDRESS OF REFERENCE IN LEBANON: SAME AS ABOVE	
RELATIONSHIP TO HOST IN LEBANON: WIFE		CONTACT NUMBER: 7703934380	
MAIN PURPOSE(S) OF VISIT:			
<input type="checkbox"/> TOURISM <input type="checkbox"/> BUSINESS <input type="checkbox"/> MEDICAL <input type="checkbox"/> EDUCATION <input type="checkbox"/> OFFICIAL <input checked="" type="checkbox"/> FAMILY/ FRIENDS <input type="checkbox"/> TRANSIT			
EXPLAIN To spend time with my husband and his family			
DATE OF ARRIVAL: 19th August	DURATION OF STAY: 6 MONTHS	ACCOMPANIED BY:	
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input checked="" type="checkbox"/> MULTIPLE ENTRY			
PREVIOUSLY VISITED LEBANON: <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES - IF YES, WHEN (DD/MM/YYYY) 23/12/2020			
ENTERING LEBANON: <input checked="" type="checkbox"/> BY AIR <input type="checkbox"/> BY LAND <input type="checkbox"/> BY SEA			

*My signature engages my responsibility and subjects me to penalties specified by law in the event of giving a wrong declaration.
*I hereby agree not to undertake any work in Lebanon of any kind paid or unpaid.

DATE: **11/08/23**

SIGNATURE: **Nariman**

FOR OFFICIAL USE ONLY		FEES COLLECTED	
VISA NO.: _____ / _____ / _____	DATE OF ISSUE: ____/____/____	<input type="checkbox"/> 6600 RS	<input type="checkbox"/> 131250 L.L
VISA TYPE: <input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> OFFICIAL		<input type="checkbox"/> 9400 RS	<input type="checkbox"/> 187500 L.L
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE <input type="checkbox"/> MULTIPLE		<input type="checkbox"/> 13150 RS	<input type="checkbox"/> 262500 L.L
DURATION OF STAY: <input type="checkbox"/> 15 DAYS <input type="checkbox"/> 1 MONTH <input type="checkbox"/> 3 MONTHS <input type="checkbox"/> 6 MONTHS		RECEIPT: _____	

IMPORTANT: "IT IS MANDATORY TO PROVIDE ALL THE REQUIRED INFORMATIONS, LEAVING OUT ANY INFO WILL RISK REJECTING THE APPLICATION"