



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA

PH



VISA APPLICATION FORM

GIVEN NAME: ANUT VASHISHT		FAMILY NAME: SHRUTI VASHISHT	
FATHER'S NAME: NAND KISHORE VASHISHT		MOTHER'S NAME: SUMAN VASHISHT	
DATE OF BIRTH: 28/11/1983	PLACE OF BIRTH: GWALIOR (M.P)	CURRENT NATIONALITY:	OTHER NATIONALITY:
GENDER: <input checked="" type="checkbox"/> MALE <input 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:
CONTACT NUMBER: 9953492240	PERMANENT ADDRESS: B-53, HIMALAYAN CGHS LTD, PLOT NO-10 SEC 22 DWARKA PIN 110076, DELHI, INDIA		
EMAIL: ANUT@gmail.com	CURRENT ADDRESS: ROOM NO-222 SD 3A (UN) HQ MOD PIN-110011 NEW DELHI		
DESIGNATION: Lt COL	COMPANY NAME: -	ADDRESS OF COMPANY/ EMPLOYER: -	
TYPE OF TRAVEL DOCUMENT: <input type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input checked="" type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.: 01678787	DATE OF ISSUE: 07-12-2023	DATE OF EXPIRY: 06-12-2025	PLACE OF ISSUE: NEW DELHI
ADDRESS DURING YOUR STAY IN LEBANON:			
NAME OF REFERENCE IN LEBANON: -		ADDRESS OF REFERENCE IN LEBANON: FORCE HQ OF LEBANON	
RELATIONSHIP TO HOST IN LEBANON: -		CONTACT NUMBER: 9953492240	
MAIN PURPOSE(S) OF VISIT: <input type="checkbox"/> TOURISM <input type="checkbox"/> BUSINESS <input type="checkbox"/> MEDICAL <input type="checkbox"/> EDUCATION <input checked="" type="checkbox"/> OFFICIAL <input type="checkbox"/> FAMILY/ FRIENDS <input type="checkbox"/> TRANSIT			
EXPLAIN			
DATE OF ARRIVAL: 12-12-2023	DURATION OF STAY: 1 Year	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 checked="" type="checkbox"/> NO <input type="checkbox"/> YES - IF YES, WHEN (DD/MM/YYYY)			
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: **08/12/2023**

SIGNATURE: **Nanhuist**

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"