

VISA APPLICATION FORM

GIVEN NAME: LAKSHMI DEVI			FAMILY NAME: SARDAR			
FATHER'S NAME: RUPCHAND SARDAR			MOTHER'S NAME: KHO	KI BALA	SARDAR	
DATE OF BIRTH:	PLACE OF BIRTH:			CURRENT NATIONALITY: OTHER I		ATIONALITY:
12/10/1962	DHALBHU MGARH, JHARKHAND					
GENDER:	MARITAL STATUS:			RELIGION:		
□ MALE □ FEMALE □ SINGLE □ MARRIED □ SEPARATED □ DIVORCED □ WIDOW HINDULSM						
CONTACT NUMBER: PERMANENT ADDRESS: 255A, HATIBINDA DORKA SAI DHA						SAI DHALB
9931572356		HUBMGARH, EAST SINGHBHUM				
EMAIL:		CUPPENT ADDRESS: A C.S.A.				
anjanakumani 1827@gmail.com UMGARH, EAST SINGHBHUM						
DESIGNATION: COMPANY NAME: ADDRESS OF COMPANY/ EMPLOYER:						
				,		
TYPE OF TRAVEL DOCUMENT:						
☑ ÓRDINARY PASSPORT ☐ DIPLOMATIC PASSPORT ☐ OFFICIAL PASSSPORT ☐ SERVICE PASSPORT						
PASSPORT NO.:		ATE OF ISSUE:		DATE OF EXPIRY:		
V6363645 08/03/2022 0:				07/03/2032	2032 RANCHI	
ADDRESS DURING YOUR STAY IN LEBANON: EMBASSY OF INDIA BEIRVT, LEBANON						
NAME OF REFERENCE IN LEBANON: ADDRESS OF REFERENCE IN LEBANON:						
SANTANU KUMAR SINGH EMBASSY OF INDIA BETRUT, LEBANON						
RELATIONSHIP TO HOST IN LEBANON: SON CONTACT NUMBER: 9319882796						
MAIN PURPOSE(S) OF VISIT:						
☐ TOURISM ☐ BUSINESS ☐ MEDICAL ☐ EDUCATION ☐ OFFICIAL ☐ FAMILY/ FRIENDS ☐ TRANSIT						
EXPLAIN						
DATE OF ARRIVAL: DURATION OF STAY: ACCOMPANIED BY:						
05/02/2023 SIX MONTHS						
NÚMBER OF ENTRIES: ☐ SINGLE ENTRY ☐ DOUBLE ENTRY ☐ MULTIPLE ENTRY						
PREVIOUSLY VISITED LEBANON: YES - IF YES, WHEN (DD/MM/YYYY)						
ENTERING LEBANON: 12 BY AIR						
*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: 20 101 1 2023 SIGNATURE:						
FOR OFFICIAL USE ONLY					FEES COLLE	CTED
				SSUE://	☐ 6600 RS	☐ 131250 L.L
VISA TYPE: TOURIST BUSINESS DIPLOMATIC OFFICIAL					□ 9400 RS	□ 187500 L.L
NUMBER OF ENTRIES: SINGLE DOUBLE MULTIPLE					☐ 13150 RS	☐ 262500 L.L
DURATION OF STAY: ☐ 15 DAYS ☐ 1 MONTH ☐ 3 MONTHS ☐ 6 MONTHS					RECEIPT:	

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