



EMBASSY OF LEBANON  
TO  
THE REPUBLIC OF INDIA



**VISA APPLICATION FORM**

GIVEN NAME: <u>MOHD LATIF</u>		FAMILY NAME: <u>PANDIT</u>	
FATHER'S NAME: <u>ABDUL RASID PANDIT</u>		MOTHER'S NAME: <u>REHANA ASSAD</u>	
DATE OF BIRTH: <u>08.04.1972</u>	PLACE OF BIRTH: <u>SRINAGAR J&amp;K</u>	CURRENT NATIONALITY: <u>INDIAN</u>	OTHER NATIONALITY: <u>-</u>
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: <u>MUSLIM</u>	
CONTACT NUMBER:		PERMANENT ADDRESS: <u>Hamdard Colony 'B' Sahoor Lal Bazar Srinagar - 190011 J&amp;K</u>	
EMAIL: <u>bmvsj95@gmail.com</u>		CURRENT ADDRESS: <u>As above</u>	
DESIGNATION: <u>Technician</u>	COMPANY NAME: <u>BMVSS</u>	ADDRESS OF COMPANY/ EMPLOYER: <u>Sultan ur-Asifeen Artificial Limb Centre Old Gogribal Road, Buchwara, Srinagar</u>	
TYPE OF TRAVEL DOCUMENT:			
<input type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.: <u>T 0879984</u>	DATE OF ISSUE: <u>24.04.2019</u>	DATE OF EXPIRY: <u>23.04.2029</u>	PLACE OF ISSUE: <u>SRINAGAR</u>
ADDRESS DURING YOUR STAY IN LEBANON:			
NAME OF REFERENCE IN LEBANON: <u>Sandeep Groves HOC</u>		ADDRESS OF REFERENCE IN LEBANON: <u>Embassy of India Hamraa Road, Beirut Lebanon</u>	
RELATIONSHIP TO HOST IN LEBANON:		CONTACT NUMBER: <u>+961-70808682</u>	
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 type="checkbox"/> FAMILY/ FRIENDS <input type="checkbox"/> TRANSIT			
EXPLAIN <u>CONDUCTING ARTIFICIAL LIMB FITMENT CAMP</u>			
DATE OF ARRIVAL: <u>21/1/2023</u>	DURATION OF STAY: <u>90 days</u>	ACCOMPANIED BY:	
NUMBER OF ENTRIES: <input checked="" type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input 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: 12/1/23

SIGNATURE: Mohd. Latief Pandit

<b>FOR OFFICIAL USE ONLY</b>		<b>FEES COLLECTED</b>	
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"