



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA



VISA APPLICATION FORM

GIVEN NAME: PARIMAL MANOHAR		FAMILY NAME: SONAWANE	
FATHER'S NAME: MANOHAR DATTATRAYA SONAWANE		MOTHER'S NAME: SMITA MANOHAR SONAWANE	
DATE OF BIRTH: 03/07/1988	PLACE OF BIRTH: MUMBAI, MAHARASHTRA	CURRENT NATIONALITY: INDIAN	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: HINDU	
CONTACT NUMBER: 9967746717	PERMANENT ADDRESS: FLAT NO.3, VISHWAMITRA BLDG, SANT NAMDEV PATH GOGRASWADI, DOMBIVLI EAST, THANE PIN: 421201, MAHARASHTRA, INDIA		
EMAIL: SSG.PSONAVANE@CMA-CGM, DOM INDIA	CURRENT ADDRESS: FLAT NO.3, VISHWAMITRA BLDG, SANT NAMDEV PATH GOGRASWADI, DOMBIVLI EAST, THANE PIN: 421201, MAHARASHTRA		
DESIGNATION: SR. EXECUTIVE	COMPANY NAME: CMA-CGM GLOBAL BUSINESS SERVICE PVT. LTD.	ADDRESS OF COMPANY/ EMPLOYER: UNIT NO 1201, 12TH FLOOR BUILDING NO 4 GIGAPLEX ESTATE AIROLI KNOWLEDGE PARK AIROLI WEST NAVI MUMBAI 400708.	
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.: V/5032740	DATE OF ISSUE: 07/12/2021	DATE OF EXPIRY: 06/12/2031	PLACE OF ISSUE: MUMBAI
ADDRESS DURING YOUR STAY IN LEBANON: THE KEY APART HOTEL P.O. BOX: 16-7058 ACHRAFIEH, BEIRUT, LEBANON			
NAME OF REFERENCE IN LEBANON: NADA SAAD	ADDRESS OF REFERENCE IN LEBANON: CMA CGM GBS BEIRUT DIGITAL DISTRICT BEIRUT, LEBANON		
RELATIONSHIP TO HOST IN LEBANON: TEAM MEMBER FROM INDIA	CONTACT NUMBER: +9611959280		
MAIN PURPOSE(S) OF VISIT: <input type="checkbox"/> TOURISM <input checked="" 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 TRAINING PURPOSE			
DATE OF ARRIVAL: 20TH NOV 2022	DURATION OF STAY: 15 DAYS	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: **19/10/2022**

SIGNATURE: **P.M. Sonawane**

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"

For further informations please visit us on [f](https://www.facebook.com/EmbassyofLebanonInIndia) Embassy of Lebanon in New Delhi (@embassy.of.lebanon.in.india)

[i](https://www.instagram.com/EmbassyofLebanonInIndia) Embassy of Lebanon, India (@embassy_lebanon)

www.embassyoflebanon.in