



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA

PHOTO

VISA APPLICATION FORM

GIVEN NAME: SAMARTH		FAMILY NAME: THADANI	
FATHER'S NAME: SUBHASH THADANI		MOTHER'S NAME: ANSIKA THADANI	
DATE OF BIRTH: 24/09/1998	PLACE OF BIRTH: DELHI	CURRENT NATIONALITY: INDIA	OTHER NATIONALITY:
GENDER: MALE <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	MARITAL STATUS: SINGLE <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW		RELIGION: HINDU
CONTACT NUMBER: 9811952269	PERMANENT ADDRESS: PLOT NO-4, ROAD NO- 18, PUNJABI BAGH EXTN. DELHI -110026		
EMAIL: raviair.delhi@gmail.com	CURRENT ADDRESS: PLOT NO-4, ROAD NO- 18, PUNJABI BAGH EXTN. DELHI -110026		
DESIGNATION:	COMPANY NAME:	ADDRESS OF COMPANY/ EMPLOYER:	
TYPE OF TRAVEL DOCUMENT: ORDINARY PASSPORT <input checked="" type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.: N9048219	DATE OF ISSUE: 20/06/2016	DATE OF EXPIRY: 19/06/2026	PLACE OF ISSUE: DELHI
ADDRESS DURING YOUR STAY IN LEBANON: BEIT MERI - NABEH SAADEH- VILLA 282			
NAME OF REFERENCE IN LEBANON: ANDREW ANTOINE HAJJAR		ADDRESS OF REFERENCE IN LEBANON: BEIT MERI - NABEH SAADEH- VILLA 282	
RELATIONSHIP TO HOST IN LEBANON: FRIEND		CONTACT NUMBER: +961 70 677 897	
MAIN PURPOSE(S) OF VISIT: FRIENDS <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			
DATE OF ARRIVAL: 23/06/2023	DURATION OF STAY: 9 DAYS	ACCOMPANIED BY:	
NUMBER OF ENTRIES: <input checked="" type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input type="checkbox"/> MULTIPLE ENTRY SINGLE ENTRY PREVIOUSLY VISITED LEBANON: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES - IF YES, WHEN (DD/MM/YYYY) _____ NO _____ ENTERING LEBANON: <input checked="" type="checkbox"/> BY AIR <input type="checkbox"/> BY LAND <input type="checkbox"/> BY SEA 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: / /

SIGNATURE: *Sayad Fadi*

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