



VISA APPLICATION FORM

GIVEN NAME: BISHWANATH PRASAD		FAMILY NAME: VERMA	
FATHER'S NAME: GHANSHYAM PRASAD VERMA		MOTHER'S NAME: LALITA DEVI	
DATE OF BIRTH: 08/02/1972	PLACE OF BIRTH: DARBHANGA, BIHAR	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: 9311427770	PERMANENT ADDRESS: A71902, NIRALA ASPIRE PLOT NO G403		
EMAIL: NEW2WAY22@GMAIL.COM	CURRENT ADDRESS: A71902, NIRALA ASPIRE PLOT NO G403		
DESIGNATION: UNDER SECRETARY	COMPANY NAME: GOVT OF INDIA	ADDRESS OF COMPANY/ EMPLOYER: MINISTRY OF EXTERNAL AFFAIRS, D-23 JNB, JANPATH, NEW DELHI	
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.: 01658807	DATE OF ISSUE: 16/01/2023	DATE OF EXPIRY: 15/01/2026	PLACE OF ISSUE: NEW DELHI, INDIA
ADDRESS DURING YOUR STAY IN LEBANON: NO. 239, IBRAHIM ABED EL AAL STREET, RAS BEIRUT, P.O. BOX NO. 113-5240 BEIRUT, LEBANON			
NAME OF REFERENCE IN LEBANON: EMBASSY OF INDIA		ADDRESS OF REFERENCE IN LEBANON: - AS ABOVE -	
RELATIONSHIP TO HOST IN LEBANON: EMPLOYER		CONTACT NUMBER: 00-961-1-735922	
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 OFFICIAL WORK AT EMBASSY OF INDIA, BEIRUT			
DATE OF ARRIVAL: 12-03-2023	DURATION OF STAY: 08 DAYS	ACCOMPANIED BY: NIL	
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: ___/___/___

SIGNATURE *B. Prasad*

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: _____	