

VISA APPLICATION FORM

GIVEN NAME: <b>PARAMVIR SINGH</b>		FAMILY NAME: <b>DAGAR</b>	
FATHER'S NAME: <b>KARTAR SINGH DAGAR</b>		MOTHER'S NAME: <b>BIMLA DAGAR</b>	
DATE OF BIRTH: <b>15/5/1971</b>	PLACE OF BIRTH: <b>DELHI</b>	CURRENT NATIONALITY: <b>INDIAN</b>	OTHER NATIONALITY:
GENDER: <input 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: <b>HINDU</b>	
CONTACT NUMBER: <b>8764168039</b>	PERMANENT ADDRESS: <b>B-60-61, SANJAY NAGAR MANGOLPUR KALAN, POCKET NEAR SHEEL PARK ROHINI DELHI 110085</b>		
EMAIL: <b>paramvir1971@gmail.com</b>	CURRENT ADDRESS: <b>Room-222 SD-3A (UN) IHA OF MOD (ARMY) SOUTH BLOCK 100</b>		
DESIGNATION: <b>BRIGEDER</b>	COMPANY NAME: <b>INDIAN ARMY</b>	ADDRESS OF COMPANY/ EMPLOYER: <b>FORCE HQ LEBANON</b>	
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.: <b>01654725</b>	DATE OF ISSUE: <b>21/10/2022</b>	DATE OF EXPIRY: <b>20/10/2024</b>	PLACE OF ISSUE: <b>NEW DELHI</b>
ADDRESS DURING YOUR STAY IN LEBANON: <b>FORCE HQ LEBANON</b>			
NAME OF REFERENCE IN LEBANON:		ADDRESS OF REFERENCE IN LEBANON: <b>FORCE HQ LEBANON</b>	
RELATIONSHIP TO HOST IN LEBANON:		CONTACT NUMBER:	
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 _____			
DATE OF ARRIVAL: <b>10/11/2022</b>	DURATION OF STAY: <b>10 NOV 13 NOV 22</b>	ACCOMPANIED BY: <b>INDIAN ARMY</b>	
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input type="checkbox"/> MULTIPLE ENTRY			
PREVIOUSLY VISITED LEBANON: <input type="checkbox"/> NO <input type="checkbox"/> YES - IF YES, WHEN (DDMM/YYYY) _____			
ENTERING LEBANON: <input 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>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"