



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA



VISA APPLICATION FORM

GIVEN NAME: VIKRAMT		FAMILY NAME: —	
FATHER'S NAME: JAI BHABHWANI		MOTHER'S NAME: ISHWANTI	
DATE OF BIRTH: 25-12-2002	PLACE OF BIRTH: KATTHAL HARYANA	CURRENT NATIONALITY: INDIAN	OTHER NATIONALITY: NA
GENDER: <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	MARITAL STATUS: <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: 98180 PLEYEAR 85174	PERMANENT ADDRESS: NEAR GOPI WALI KUI KIRTI MAJIAR BHIWAMI HARYANA		
EMAIL: BASKETBALLFEDERAT.10MINDIA@GMAIL.COM	CURRENT ADDRESS: NEAR GOPI WALI KUI KIRTI MAJIAR BHIWAMI HARYANA		
DESIGNATION: PLEYEAR	COMPANY NAME: BASKETBALL FEDERATION	ADDRESS OF COMPANY/ EMPLOYER: #148 BARAKHAMBA ROAD B-1 LOWER GROUND FLOOR STATMENT HOUSE DELHI	
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.: S4557051	DATE OF ISSUE: 09-07-2018	DATE OF EXPIRY: 08-07-2028	PLACE OF ISSUE: CHANDIGARH
ADDRESS DURING YOUR STAY IN LEBANON: WHITE HOUSE HOTEL BLOCK 3TH FLOOR BEIRUT LEBANON			
NAME OF REFERENCE IN LEBANON: MR-CHARBEL RIZK		ADDRESS OF REFERENCE IN LEBANON: LEBANON BASKETBALL FEDERATION	
RELATIONSHIP TO HOST IN LEBANON: _____		CONTACT NUMBER: +91 147 2 2033	
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 FIBA COP 2022			
DATE OF ARRIVAL: 8-11-2022	DURATION OF STAY: 10 DAYS	ACCOMPANIED BY: BASKETBALL FEDERATION OF INDIA	
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: **30/10/2022**

SIGNATURE: **P. K. K. K.**

FOR OFFICIAL USE ONLY		FEES COLLECTED	
VISA NO.: _____ / _____ / 2022	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"