



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA



VISA APPLICATION FORM

GIVEN NAME: MALKIT RAM		FAMILY NAME:	
FATHER'S NAME: RAKHA RAM		MOTHER'S NAME: JERO	
DATE OF BIRTH: 01.01.1955	PLACE OF BIRTH: KALIANPUR, PUNJAB	CURRENT NATIONALITY: INDIAN	OTHER NATIONALITY: INDIAN
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: SIKH	
CONTACT NUMBER: +91 92641 10812	PERMANENT ADDRESS: VILLAGE KALIANPUR, P.O. PAVTARURIA, TEHSIL PHILLAUR, JALANDHAR, PIN: 144035, PUNJAB, INDIA		
EMAIL: malkitram@gmail.com	CURRENT ADDRESS: -		
DESIGNATION: BUSINESS OWNER	COMPANY NAME: GROCERY MART	ADDRESS OF COMPANY/ EMPLOYER: VILLAGE KALIANPUR, P.O. PAVTARURIA TEHSIL, PHILLAUR, JALANDHAR, PIN: 144035, PUNJAB, INDIA	
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.: N2225455	DATE OF ISSUE: 11.08.2015	DATE OF EXPIRY: 10.08.2025	PLACE OF ISSUE: JALANDHAR
ADDRESS DURING YOUR STAY IN LEBANON: -			
NAME OF REFERENCE IN LEBANON: BRITANNIA SUITES	ADDRESS OF REFERENCE IN LEBANON: ANDALOS STREET, OFF AUSTRALIA STREET, BEIRUT LEBANON		
RELATIONSHIP TO HOST IN LEBANON: -	CONTACT NUMBER: +961798799		
MAIN PURPOSE(S) OF VISIT: <input checked="" 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 _____			
DATE OF ARRIVAL: 21-10-2023	DURATION OF STAY: 35 days	ACCOMPANIED BY: MYSELF	
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 (DDMMYYYY) _____			
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: **11/10/2023**

SIGNATURE: **[Signature]**

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"