



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA



VISA APPLICATION FORM

GIVEN NAME: MUFADDAL SAIFUDDIN		FAMILY NAME: DEESAWALA	
FATHER'S NAME: SAIFUDDIN FIDAALI DEESAWALA HAJERA S. DEESAWALA		MOTHER'S NAME: INDIAN	
DATE OF BIRTH: 16/09/1972	PLACE OF BIRTH: CHENNAI, TAMILNADU INDIA	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: MUSLIM	
CONTACT NUMBER: 080-41141531	PERMANENT ADDRESS: No. 87 3RD MAIN 1ST PHASE TEJASWINI NAGAR B.G. RD BENGALORE		
EMAIL:	CURRENT ADDRESS: As Same Above		
DESIGNATION: PARTNER	COMPANY NAME: ADWAN ROOFS	ADDRESS OF COMPANY/ EMPLOYER: NO. 5 JALARAM INDOS ESTATE BLR	
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.: W1933513	DATE OF ISSUE: 20/06/2022	DATE OF EXPIRY: 19/06/2032	PLACE OF ISSUE: BENGALORE
ADDRESS DURING YOUR STAY IN LEBANON: BECHARA EL KHOURY, BEIRUT LEBANON			
NAME OF REFERENCE IN LEBANON: HUSSEIN ABDALLAH		ADDRESS OF REFERENCE IN LEBANON: BECHARA EL KHOURY, BEIRUT LEBANON	
RELATIONSHIP TO HOST IN LEBANON: CLIENT		CONTACT NUMBER: +961-70809737	
MAIN PURPOSE(S) OF VISIT: <input type="checkbox"/> TOURISM <input checked="" 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: 22/08/23	DURATION OF STAY: 07 DAYS	ACCOMPANIED BY: SELF	
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: ___/___/___

SIGNATURE: Deesawala

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"

For further informations please visit us on Embassy of Lebanon in New Delhi (@embassy.of.lebanon.in.india)
 Embassy of Lebanon, India (@embassy_lebanon)
 www.embassyoflebanon.in