



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA



VISA APPLICATION FORM

GIVEN NAME: PRAMOD KUMAR		FAMILY NAME:	
FATHER'S NAME: SUNDER LAL		MOTHER'S NAME: NIRMALA DEVI	
DATE OF BIRTH: 08-10-1987	PLACE OF BIRTH: DELHI, DELHI	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:
CONTACT NUMBER: 91 989170 2006	PERMANENT ADDRESS: 225 JAT CHOWK GALI NANGLOI, DELHI, PIN: 110041, DELHI, INDIA.		
EMAIL: pramodslaljangra@gmail.com	CURRENT ADDRESS: 225 JAT CHOWK GALI NANGLOI, DELHI, PIN: 110041, DELHI, INDIA.		
DESIGNATION: QUALITY MANAGER	COMPANY NAME: M/S SPARCO BATTERIES PVT. LTD.	ADDRESS OF COMPANY/ EMPLOYER: A-35/1, MAYAPURI INDUSTRIAL AREA PHASE-I NEW DELHI-110064, 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.: N 5949 444	DATE OF ISSUE: 08-12-2015	DATE OF EXPIRY: 07-12-2025	PLACE OF ISSUE: DELHI, RPO
ADDRESS DURING YOUR STAY IN LEBANON: SIN EL-FIL GHILAN STEET, CHAHOUD BILDING, LEBANON.			
NAME OF REFERENCE IN LEBANON: MR. ELIO MATTAR		ADDRESS OF REFERENCE IN LEBANON: SIN EL-FIL GHILAN STEET, CHAHOUD BILDING, LEBANON	
RELATIONSHIP TO HOST IN LEBANON: BUSINESS ASSOCIATES		CONTACT NUMBER: 0096179161719	
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 TO ATTEND BUSINESS MEETINGS			
DATE OF ARRIVAL: 17-11-2022	DURATION OF STAY: 22-11-2022	ACCOMPANIED BY:	
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: _____

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"