



EMBASSY OF LEBANON  
TO  
THE REPUBLIC OF INDIA



### VISA APPLICATION FORM

GIVEN NAME: PUNJAB SINGH		FAMILY NAME:	
FATHER'S NAME: GURMUKH SINGH		MOTHER'S NAME: JAGIR KAUR	
DATE OF BIRTH: 14-03-2000	PLACE OF BIRTH: MEHDIPUR TARAN TARAN	CURRENT NATIONALITY: INDIAN	OTHER NATIONALITY: NIL
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: SIKH
CONTACT NUMBER: 7814877835	PERMANENT ADDRESS: VILL.MEHDIPUR TEH:PATTI TARAN TARAN PIN:143401 PUNJAB INDIA		
EMAIL: info@citymedicinecorner.com	CURRENT ADDRESS: SAME ABOVE		
DESIGNATION: BUSINESS OWNER	COMPANY NAME: CITY MEDICINE CORNER	ADDRESS OF COMPANY/ EMPLOYER: SHOP NO.182,Chatiwind GateMoni Chowk Nimak Mandi Town hall Amritsar 143001 PUNJAB	
TYPE OF TRAVEL DOCUMENT: <input checked="" type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input type="checkbox"/> OFFICIAL PASSSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.: S 4792209	DATE OF ISSUE: 01-01-2019	DATE OF EXPIRY: 31-12-2028	PLACE OF ISSUE: AMRITSAR
ADDRESS DURING YOUR STAY IN LEBANON: Hotel Bratania Suits Andalos Street off Australia Street Beirut Lebanon			
NAME OF REFERENCE IN LEBANON: SARTAJ SINGH SAINI		ADDRESS OF REFERENCE IN LEBANON:	
RELATIONSHIP TO HOST IN LEBANON: UNCLE		CONTACT NUMBER: 961-70816522	
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 checked="" type="checkbox"/> FAMILY/ FRIENDS <input type="checkbox"/> TRANSIT			
EXPLAIN _____			
DATE OF ARRIVAL: 21 April 2023	DURATION OF STAY: 35 DAYS	ACCOMPANIED BY: 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 (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: Punjab Singh

<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"

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

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www.embassyoflebanon.in