



EMBASSY OF LEBANON  
TO  
THE REPUBLIC OF INDIA



### VISA APPLICATION FORM

GIVEN NAME: <b>SANGAMESH SHEELIN</b>		FAMILY NAME:	
FATHER'S NAME: <b>BHEEMANNA</b>		MOTHER'S NAME: <b>SIDDAMMA</b>	
DATE OF BIRTH: <b>07/06/1992</b>	PLACE OF BIRTH: <b>KANAMADI, KARNATAKA</b>	CURRENT NATIONALITY: <b>INDIAN</b>	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: <b>HINDU</b>
CONTACT NUMBER: <b>9449680763</b>	PERMANENT ADDRESS: <b>96 MED REGT, UNDOF CONTINGENT</b>		
EMAIL: <b>UNPASSPORT1111@gmail.com</b>	CURRENT ADDRESS: <b>KHANDUR CAMP, NEW DELHI, 110062</b>		
DESIGNATION: <b>PTE</b>	COMPANY NAME: <b>INDIAN ARMY</b>	ADDRESS OF COMPANY/ EMPLOYER: <b>LEBANON</b>	
TYPE OF TRAVEL DOCUMENT:			
<input type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input checked="" type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.: <b>01678449</b>	DATE OF ISSUE: <b>24/11/2023</b>	DATE OF EXPIRY: <b>23/11/2023</b>	PLACE OF ISSUE: <b>NEW DELHI</b>
ADDRESS DURING YOUR STAY IN LEBANON: <b>UNMISSION</b>			
NAME OF REFERENCE IN LEBANON:		ADDRESS OF REFERENCE IN LEBANON:	
RELATIONSHIP TO HOST IN LEBANON:		CONTACT NUMBER:	
MAIN PURPOSE(S) OF VISIT:			
<input type="checkbox"/> TOURISM <input type="checkbox"/> BUSINESS <input type="checkbox"/> MEDICAL <input type="checkbox"/> EDUCATION <input checked="" type="checkbox"/> OFFICIAL <input type="checkbox"/> FAMILY/ FRIENDS <input type="checkbox"/> TRANSIT			
EXPLAIN <b>UNMISSION</b>			
DATE OF ARRIVAL:	DURATION OF STAY:	ACCOMPANIED BY:	
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input checked="" 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:

<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"