



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA

PHOTO

VISA APPLICATION FORM

GIVEN NAME: SOUMYA TEJAS		FAMILY NAME:	
FATHER'S NAME: NAGIN CHAND		MOTHER'S NAME: KAILASH NIHARIKA	
DATE OF BIRTH: 20/11/1987	PLACE OF BIRTH: SRI GANGANAGAR RAJASTHAN, INDIA	CURRENT NATIONALITY: INDIAN	OTHER NATIONALITY:
GENDER: <input type="checkbox"/> MALE <input checked="" 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: HINDU	
CONTACT NUMBER: 9971904952	PERMANENT ADDRESS: D-83, FIRST FLOOR, DAYAL BACH COLONY, FARIDABAD, HARYANA 121009		
EMAIL: soumya.tejas@hotmail.com	CURRENT ADDRESS: W-112, THIRD FLOOR, GREATER KAILASH - I, NEW DELHI 110048		
DESIGNATION: SELF EMPLOYED	COMPANY NAME: SELF EMPLOYED	ADDRESS OF COMPANY/ EMPLOYER:	
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.: U0497572	DATE OF ISSUE: 09/10/2020	DATE OF EXPIRY: 08/10/2030	PLACE OF ISSUE: SAN FRANCISCO
ADDRESS DURING YOUR STAY IN LEBANON: 9TH FLOOR, MANARA BUILDING, BLISS STREET, NEAR GERMAN SCHOOL			
NAME OF REFERENCE IN LEBANON: KISHORE KUMAR SINGH	ADDRESS OF REFERENCE IN LEBANON: 9TH FLOOR, MANARA BUILDING, BLISS STREET, NEAR GERMAN SCHOOL		
RELATIONSHIP TO HOST IN LEBANON: FRIEND	CONTACT NUMBER: +962 70391161		
MAIN PURPOSE(S) OF VISIT: <input 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 VISITING FRIEND			
DATE OF ARRIVAL: 21/10/2022	DURATION OF STAY: 10 DAYS	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: **06/10/2022**

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"