

VISA APPLICATION FORM

| ATTENDED TO A SEC. | | FAMILY NAME: | |
|--|---|---------------------------|-------------------------|
| GIVEN NAME: AMITABH | | JHA | |
| FATHER'S NAME: | | MOTHER'S NAME: | |
| JAGDISH JHA | | PAATIMA JHA | |
| DATE OF BIRTH: | PLACE OF BIRTH: | CURRENT NATIONALITY: | 1 |
| 28/08/1972 | RANCHI, JHARKHAN | INDIAN | |
| GENDER: | MARITAL STATUS: | | RELIGION: |
| MALE FEMALE | SINGLE MARRIED SEPARATED DIVORCED WIDOW HINDU | | |
| CONTACT NUMBER: PERMANENT ADDRESS: 18 SUBH BUNGLOWS, | | | OWS, THALTEJ |
| 9560280293 AHME | | DABAD, GUJARAT PIN-380059 | |
| 9560290293 AHMEDABAD, QUIARAT PIN-380059 EMAIL: CURRENT ADDRESS: 222 RNO, SD3A(UN), SOUTH BLOCK | | | |
| AJhangmail.com ING & MOD (Army), PIN - 110011 DESIGNATION: COMPANY NAME: ADDRESS OF COMPANY EMPLOYER: | | | |
| DESIGNATION: COMPANY NAME: ADDRESS OF COMPANY/ EMPLOYER: | | | |
| BRIGADER | INDIAN ARMY | | ν |
| TYPE OF TRAVEL DOCUMENT: | | | |
| ☐ ORDINARY PASSPORT ☐ DIPLOMATIC PASSPORT ☐ OFFICIAL PASSSPORT ☐ SERVICE PASSPORT | | | |
| PASSPORT NO.: | DATE OF ISSUE: 12/01/2023 | DATE OF EXPIRY: | PLACE OF ISSUE: |
| 01658762 | 13/01/2023 | 12/01/2026 | NEW DELHI |
| ADDRESS DURING YOUR STAY IN LEBANON: | | | |
| FORCE HO OF LEBANON | | | |
| NAME OF REFERENCE IN LEBANON: ADDRESS OF REFERENCE IN LEBANON: | | | |
| ADDRESS OF REFERENCE IN LEBANON: FORCE HO & LEBANON (UNIFIL) | | | |
| RELATIONSHIP TO HOST IN LEBANON: CONTACT NUMBER: | | | |
| MAIN PURPOSE(S) OF VISIT: | | | |
| □ TOURISM □ BUSINESS □ MEDICAL □ EDUCATION □ OFFICIAL □ FAMILY/ FRIENDS □ TRANSIT | | | |
| EXPLAIN | | | |
| DATE OF ARRIVAL: DURATION OF STAY: ACCOMPANIED BY: | | | |
| 05 April 2023 01 Years | | | |
| NUMBER OF ENTRIES: SINGLE ENTRY DOUBLE ENTRY MULTIPLE ENTRY | | | |
| PREVIOUSLY VISITED LEBANON: DINO DE YES - IF YES, WHEN (DD/HAM/YYYY) | | | |
| ENTERING LEBANON: DEY AIR DEY LAND DEY 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. | | | |
| *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.:// | | | ☐ 6600 RS ☐ 131250 L.L. |
| VISA TYPE: ☐ TOURIST ☐ BUSINESS ☐ DIPLOMATIC ☐ OFFICIAL | | | □ 9400 RS □ 187500 L.L |
| NUMBER OF ENTRIES: SINGLE DOUBLE MULTIPLE | | | ☐ 13150 RS ☐ 262500 L.L |
| DURATION OF STAY: 🗆 15 DAYS 🗀 1 MONTH 🗀 3 MONTHS 🗀 6 MONTHS | | | RECEIPT: |

IMPORTANT: "IT IS MANDATORY TO PROVIDE ALL THE REQUIRED INFORMATIONS, LEAVING OUT ANY INFO WILL RISK REJECTING THE APPLICATION"