

## EMBASSY OF LEBANON TO THE REPUBLIC OF INDIA

## **VISA APPLICATION FORM**

GIVEN NAME:	2	FAMILY NAME:	, 是有是在
NARESH	DHARAMDAS	GANGLANI	
FATHER'S NAME:		, MOTHER'S NAME:	1
DHARAMDAS	CHETANDAS GANGL	CURRENT NATIONALITY:	RAMDAS GANGLAM
DATE OF BIRTH:			
30/07/1963	KANO, NIGERIA	INDIAN	TNDIAN RELIGION:
GENDER:	MARITAL STATUS:		RELIGION:
□ MALE □ FEMALE □ MARRIED □ SEPARATED □ DIVORCED □ WIDOW			
CONTACT NUMBER: PERMANENT ADDRESS: FLAT 9 B, BLOCK C, BINNY CRESCO			
EMAIL: CURRENT ADDRESS:			
EMAIL: CURRENT ADDRESS:			
		Above	9
DESIGNATION:		RESS OF COMPANY/ EMPLOYER	R:
0 = - 1 0 = -			
RETTIRED	-MA -	-NA-	
TYPE OF TRAVEL DOCUMENT:			
□-ORDINARY PASSPORT □ DIPLOMATIC PASSPORT □ OFFICIAL PASSSPORT □ SERVICE PASSPORT			
PASSPORT NO.:	DATE OF ISSUE:	DATE OF EXPIRY:	PLACE OF ISSUE:
7 5035637	0710812018	06/08/2018	RENCALADE
25035633 07/08/2018 06/08/2018 BENGALORE ADDRESS DURING YOUR STAY IN LEBANON: LA VIDA SUITE			
CHOURAN STR, REIRUT LEBANON			
NAME OF REFERENCE IN LEBANON: ADDRESS OF REFERENCE IN LEBANON:			
LA VIDA SUITE CHOURAN STR BEIRUT LEBANON			
RELATIONSHIP TO HOST IN LEBANON: HOTEL CONTACT NUMBER: +961 1960 960			
MAIN PURPOSE(S) OF VISIT:			
☐ TOURISM ☐ BUSINESS ☐ MEDICAL ☐ EDUCATION ☐ OFFICIAL ☐ FAMILY/ FRIENDS ☐ TRANSIT			
EXPLAIN VISITING Lebonon			
DATE OF ARRIVAL:	DURATION OF STAY:	ACCOMPANIED BY:	
17/05/2023	15 DAYS	SELF	
NUMBER OF ENTRIES: SINGLE ENTRY DOUBLE ENTRY MULTIPLE ENTRY			
PREVIOUSLY VISITED LEBANON: TO YES - IF YES, WHEN (DD/MM/YYYY)			
ENTERING LEBANON: □BÝ AIR □ BY LAND □ 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:/		S	IGNATURE: ND Genryham
FOR OFFICIAL USE ON	LY		FEES COLLECTED
VISA NO.: / DATE OF ISSUE: / /			□ 6600 RS □ 131250 L.L
DATE OF 1880E.			□ 9400 RS □ 187500 L.L
VISA TYPE: □ TOURIST □ BUSINESS □ DIPLOMATIC □ OFFICIAL			
NUMBER OF ENTRIES: SINGLE DOUBLE MULTIPLE			□ 13150 RS □ 262500 L.L
DURATION OF STAY:   15	DAYS 1 MONTH 3 MONTHS	☐ 6 MONTHS	RECEIPT:

 $\underline{\text{IMPORTANT}}\text{: "IT IS MANDATORY TO PROVIDE ALL THE REQUIRED INFORMATIONS, LEAVING OUT ANY INFO WILL RISK REJECTING THE APPLICATION"}$