



Embassy of India
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URGENT

ADDITIONAL FORM TO BE FILLED UP BY FOREIGN PASSPORT HOLDERS

(TO BE FILLED IN CAPITAL LETTERS)

NAME OF THE APPLICANT : LAST NAME _____
FIRST NAME _____
NAME OF FATHER/SPOUSE : _____
NATIONALITY : _____
DATE & PLACE OF BIRTH : _____
PASSPORT NUMBER : _____
DATE & PLACE OF ISSUE : _____
OCCUPATION : _____
PERMANENT ADDRESS : _____
PURPOSE & DURATION FOR VISA:
APPLIED _____

(SIGNATURE OF APPLICANT)

FOR OFFICE USE ONLY

FAX/MESSAGE NO. _____ DATE _____

FORWARDED TO INDEMBASSY/HICOMIND/CONGINDIA: _____

THE ABOVE PERSON HAS APPLIED FOR BUSIENSS/TOURIST/CONFERENCE VISA FOR A PERIOD OF _____. REQUEST, CONFIRM PARTICULARS AND COMMUNICATE OBJECTION, IF ANY, TO GRANT VISA TO HIM/HER. COST RECOVERED. IF NO REPLY IS RECEIVED WITHIN 72 HOURS, AS PER GOVERNMENT INSTRUCTIONS VISA WILL BE ISSUED AFTER LOCAL CHECKS.

Assistant Consular Officer