



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA

CHECKLIST FOR TOURIST VISA

	NO	YES
1) Application form & Checklist form completely filled and signed by the applicant (All information must be correct, accurate, and legible.)	<input type="checkbox"/>	<input type="checkbox"/>
2) Letter of intent by the applicant about themselves, stating their job, reason for visiting Lebanon, any other relevant information.	<input type="checkbox"/>	<input type="checkbox"/>
3) Undertaking from the applicant in case applying through agent.	<input type="checkbox"/>	<input type="checkbox"/>
4) Photocopy of the Passport of the applicant with the validity of minimum 6 months at the time of submission of the application.	<input type="checkbox"/>	<input type="checkbox"/>
5) Two identical color photographs, which must be: - of the size of 3.5 cm x 4.5 cm - taken within the last 6 months - taken in front of a plain white or off-white background	<input type="checkbox"/>	<input type="checkbox"/>
6) Prior Air ticket booking, to Lebanon, for arrival and departure.	<input type="checkbox"/>	<input type="checkbox"/>
7) Hotel reservation in the name of the applicant or "Invitation Letter" from the Lebanese counterpart with clear address details in Lebanon. In case the invitee is a Lebanese Citizen, a copy of his/her ID proof must be attached. If the Invitee is foreign national residing in Lebanon, Residential Permit Card with a minimum validity of 3 months should be attached.	<input type="checkbox"/>	<input type="checkbox"/>
8) Latest "Bank Statement" of at least 3 months showing a sufficient financial record to bear the expenditures of stay in Lebanon.	<input type="checkbox"/>	<input type="checkbox"/>

I declare that all information and documents submitted to the Embassy are true and genuine.

If such information and/or documents are untrue or not genuine, I acknowledge the right of the Embassy to take legal action against me.

1) Applicant Name: _____

Signature: _____

2) Application Submitted by: _____

Contact Number: _____

Signature: _____

Comments by VFS (if any): _____

VFS Staff: Name: _____

Date: ____/____/____

Please note that:

1. The Embassy has the right not to issue a visa without stating any reason.

2. The Embassy has the right to reject an incomplete or damaged application form; or an application with incomplete or unclear or illegible documents.

3. The Embassy has the right to request (an) additional document(s) other than the documents stated in this form.

4. The Embassy shall not issue visas to applicants who provide untrue information or fake documents, and shall blacklist those who do so.



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PHOTO

VISA APPLICATION FORM

GIVEN NAME:		FAMILY NAME:	
FATHER'S NAME:		MOTHER'S NAME:	
DATE OF BIRTH:	PLACE OF BIRTH:	CURRENT NATIONALITY:	OTHER NATIONALITY:
SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	MARITAL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW		RELIGION:
CONTACT NUMBER:	PERMANENT ADDRESS:		
EMAIL:	CURRENT ADDRESS:		
DESIGNATION:	COMPANY NAME:	ADDRESS OF COMPANY/ EMPLOYER:	
TYPE OF TRAVEL DOCUMENT: <input type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.:	DATE OF ISSUE:	DATE OF EXPIRY:	PLACE OF ISSUE:
NAME & ADDRESS OF REFERENCE IN LEBANON:			
ADDRESS DURING YOUR STAY IN LEBANON:			
RELATIONSHIP TO HOST IN LEBANON: _____ NAME (i): _____ (ii): _____			
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 type="checkbox"/> FAMILY/ FRIENDS <input type="checkbox"/> TRANSIT <input type="checkbox"/> OTHER (please specify) _____			
DATE OF ARRIVAL:	DURATION OF STAY:	ACCOMPANIED BY:	
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input type="checkbox"/> MULTIPLE ENTRY PREVIOUSLY VISITED LEBANON: <input type="checkbox"/> NO <input type="checkbox"/> YES - IF YES, WHEN (DD/MM/YYYY) _____ ENTERING LEBANON: <input 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: _____

FOR OFFICIAL USE ONLY	FEES COLLECTED
VISA NO.: ____/____/____	<input type="checkbox"/> 2625 RS <input type="checkbox"/> 52500 L.L
DATE OF ISSUE: ____/____/____	<input type="checkbox"/> 3750 RS <input type="checkbox"/> 75000 L.L
VISA TYPE: <input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> OFFICIAL	<input type="checkbox"/> 5250 RS <input type="checkbox"/> 105000 L.L
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE <input type="checkbox"/> MULTIPLE	RECEIPT: _____
DURATION OF STAY: <input type="checkbox"/> 15 DAYS <input type="checkbox"/> 1 MONTH <input type="checkbox"/> 3 MONTHS <input type="checkbox"/> 6 MONTHS	