

APPLICATION FORM FOR SPECIAL PERMIT

Form No.:

INSTRUCTIONS: Write in English and CAPITAL LETTERS. Use only Blue/Black Ball Point Pen. One character in one Box
Do not write outside the box DO NOT USE PHOTOCOPY OF THIS FORM. Put cross (x) in the relevant box only
To be filled by candidate in his own handwriting.

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Spl. Permit No.:	FOR OFFICE USE ONLY	Country Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
City name	Year	Fees (Rs.)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Sur Name

Middle Name

First Name

Parentage

Date of Birth (DD/MM/YYYY) Place of Birth

Occupation

If Government employee, appointment held

Address in India

City Name Pin Code

Telephone No. E-mail ID (Write in CAPITAL)

Address abroad

City Name

Telephone No.

Passport No. Date of Issue (DD/MM/YYYY)

Place of Issue

Visa No. Date of Issue (DD/MM/YYYY)

Place of Issue

Places within the restricted areas proposed to be visited:

[Empty box for Form Number]

Date of arrival in India (DD/MM/YYYY)

[Date input boxes]

Place of arrival in India

[Place of arrival input boxes]

Address in the restricted area

[Address input boxes]

Period of proposed visit from (DD/MM/YYYY)

[From date input boxes]

To (DD/MM/YYYY)

[To date input boxes]

Route intended to be followed while entering/leaving the restricted areas

[Route input boxes]

Mode of Journey

[Mode of Journey input boxes]

Purpose of Visit

[Purpose of Visit input boxes]

Whether applied for a permit to visit restricted or inner-line area before

Yes No

If yes, state whether permission was granted

Yes No

If permission was granted

(i) Place of Visit

[Place of Visit input boxes]

(ii) Period of visit From:

[From date input boxes]

To:

[To date input boxes]

Address to which permit, if granted, is to be sent

[Address input boxes]

City Name

[City Name input boxes]

Signature of Applicant

[Signature box]