

E.A. (P)-2 EXTERNAL

## FREE OF CHARGE

## APPLICATION FORM FOR MISCELLANEOUS SERVICES ON INDIAN PASSPORTS

(For use of Indian Mission) (a) PCC (b) Any Other Service (Kindly Specify).

(Please delete inapplicable)

Please staple one

Photograph of size of 45

mm X 45 mm

Payment of Fee (to be filled by applican	it)
Amount Paid	by (Mode of Payment)

2. Applicant's Car Driving License No.	Date & Place of Issue
3. Residential Address:  (i) In India	(ii) In Country of Domicile
Tel no  4. Profession and Business Address	Tel no
Tel:	
E-mail :	
5. Is applicant registered with the Indian N any Indian Organization? Give details.	Mission/Post? If not, is he a member of
	Iission/Post? If not, is he a member of
<ul><li>any Indian Organization? Give details.</li><li>6. (i).Name of Father</li></ul>	Iission/Post? If not, is he a member of
any Indian Organization? Give details.  6. (i).Name of Father  (ii). Name of Mother	
any Indian Organization? Give details.  6. (i).Name of Father  (ii). Name of Mother	

## **DECLARATION:**

i colonini, animi una.	Ι	sol	lemnly	affirm	that:
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- (i) I owe allegiance to the sovereignty and integrity of India.
- (ii) Information given above is correct and nothing has been concealed and I am aware that it is an offence under the Passport Act 1967 to knowingly furnish false information or suppress material information; and
- (iii) I undertake to be entirely responsible for expenses of my son/daughter/ward.

	Signature of applicant or T.I. of his legal guardian (Left hand thumb impression of male and right hand thumb impression of female)
Place	Date

## FOR OFFICE USE