



CONSULATE GENERAL OF INDIA
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 VCPV@IndianConsulate-sf.org
 www.IndianConsulate-sf.org

ADDITIONAL FORM TO BE FILLED IN BY NON RESIDENTS /VISITORS IN U.S.A.
ALONG WITH VISA APPLICATION FORM

TO BE FILLED IN CAPITALS (BLACK INK)

SURNAME/ FAMILY NAME.....
 FIRST & MIDDLE NAME.....
 NAME OF FATHER/ SPOUSE.....
 NATIONALITY.....
 DATE OF BIRTH..... PLACE OF BIRTH.....
 PASSPORT NO.....
 DATE OF ISSUE..... PLACE OF ISSUE.....
 PROFESSION/ OCCUPATION.....
 PERMANENT ADDRESS.....
 TEL NO.....
 PURPOSE OF VISIT.....
 TYPE OF VISA REQUESTED..... PERIOD.....

.....
 SIGNATURE OF APPLICANT

(FOR OFFICIAL USE ONLY)

Dated.....

Forwarded to Indembassy/ Hicominst/ Congendia.....with the
 request to convey your No Objection to grant of visa to above applicant urgently. If no reply is
 received within 72 hours of issue of this msg., your clearance shall be presumed and visa issued
 as per relevant instructions/ local checks

Vice Consul (PV)