

FORM B

**Embassy of India
Tel Aviv**

**ADDITIONAL FORM TO BE FILLED IN ALONGWITH AN APPLICATION FORM
(To be filled in along with Passport Application by every applicant)**

Ref No: _____

Date: _____

To
RPO/PO/Embassy/High Commission/Consulate General of India,

Subject: Issue of Passport in lieu of passport expiring shortly/lost/damaged

TO BE FILLED IN CAPITAL LETTERS

Surname of the applicant: _____

First & Middle Name: _____

Name of Father: _____
(Surname) (First Name) (Middle Name)

Name of Mother: _____
(Surname) (First Name) (Middle Name)

Name of spouse: _____
(Surname) (First Name) (Middle Name)

Date & Place of Birth: _____

Nationality of applicant: _____

Passport Number: _____

Date & place of issue: _____

Permanent Address: _____

City: _____ State _____ PIN Code _____

Grateful convey your clearance/objection, if any, by return fax (00 972 736 5615) / E-Mail: cons1.telaviv@mea.gov.in). In case no reply is received within 7 days, it will be presumed that you have no objection to grant of Fresh passport.
