



HIGH COMMISSION OF INDIA
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NOTE: ADDITIONAL FORM TO BE FILLED IN BY NON-SINGAPOREAN NATIONALS (IN BOLD AND CAPITAL LETTERS) ALONG WITH APPLICATION FORMS

DIRECT VISA SECTION FAX NO. (65) 67321462

DATE : _____

FROM : HCI SINGAPORE

TO : CGI/HCI/INDEMBASSY/ _____

THE FOLLOWING NATIONAL HAS APPLIED FOR _____

NAME: _____

FATHERS' NAME : _____

SEX : _____

PLACE OF BIRTH: _____

DATE OF BIRTH : _____ NATIONALITY : _____

PASSPORT NO: _____ PLACE OF ISSUE : _____

DATE OF ISSUE : _____ DATE OF EXPIRY : _____

OCCUPATION : _____

SINGAPORE WP/EP/PR (PASS) NO. : _____
(if any specify please)

PERMANENT ADDRESS : _____

GRATEFUL FOR "NO OBJECTION" AT THE EARLIEST. IN CASE WE DO NOT HEAR FROM YOU WITHIN _____, WE INTEND TO ISSUE VISA TO THE APPLICANT.

Assistant Consular Officer
HIGH COMMISSION OF INDIA
SINGAPORE