APPLICATION FORM FOR MISCELLANEOUS SERVICES ON INDIAN PASSPORT:

(For use in Indian Mission/Post) (a) Renewal (b) Additional Booklet (c) Change of Address (d) PCC
(e) Additional Endorsement (f) Child Deletion (g) Any Other Service (Specify)

Please staple
one Photograph
of size of:
35 mm × 45 mm &
enclose three
for additional
booklet

Payment of Fee (to be filled by applicant)

Amount Paid $/£ ____________________ by ____________________ (Mode of Payment)

(For Delivery by mail $/£ __________ extra to be paid as postal charges for each passport)
1. **Full Name** __________________________________________

2. **Name/Driving License No.**

   **Applicant's Car Driving Licence No.**

   **Date & Place of Issue** __________________________________________

3. **Residential Address:**

   (i) **Temporary**

   __________________________________________________________________

   (ii) **Permanent**

   __________________________________________________________________

4. **Tel./Office Address:**

   __________________________________________________________________

5. **Are you a member of any Indian Organisation? Give details.**

   Is applicant registered with the Indian Mission/Post? If not is he a member of any Indian Organisation? Give details.

6. (i) **Name of Father**

   __________________________________________________________________

   (ii) **Name of Mother**

   __________________________________________________________________

   (iii) **Spouse's Name & Nationality**

   __________________________________________________________________

7. **Passport Details:**

   **Current Passport No.**

   __________________________________________________________________

   **Date of issue**

   __________________________________________________________________

   **Valid until**

   __________________________________________________________________

8. **Particulars of children to be deleted:**

   **Name**

   __________________________________________________________________

   **Place of Birth**

   __________________________________________________________________

   **Sex (M/F)**

   __________________________________________________________________

**NOTE:** Separate passport will be issued to children of all ages. However, children below 15 years of age will be given a 5 year maximum validity passport only.
9. घोषणा:

DECLARATION:

I owe allegiance to the sovereignty, unity & integrity of India and have not voluntarily acquired the citizenship or travel document of another country. I have not lost, surrendered or been deprived of citizenship of India.

The information given by me is true and I am solely responsible for its accuracy. I am aware that it is an offence under the Passports Act, 1967 to furnish any false information or to suppress any material information with a view to obtaining passport or any other travel document.

आवेदक के हस्ताक्षर/अंगूठे का निर्णाय
(पुरुष के बाएं और मरी के दाएं हाथ के अंगूठे के निर्णाय)
Signature/Thumb Impression of applicant
(Left Hand T.I. if male and Right Hand T.I. if female)

तारीख/Date .................. रूपन/Place ....................

10. नीचे दिये गए रिक्त स्थान में सेशा (r) के लिए अपेक्षित हस्ताक्षर अथवा अंगूठे के निर्णाय के दो नमूने।

Two specimen signature or thumb impressions required for service (c) within the space given below.

FOR OFFICE USE
11. In case of minors, following passport particulars of both parents must be given:

(a) Passport No.

(b) Date of Issue

(c) Place of Issue

(d) If parents have applied for a passport, please give File No. 

12. Declaration of Parents or Guardian if passport is for minor:

We affirm that the particulars given above are in respect of (Name)

of whom we are the Parents/Guardians. We undertake the entire responsibility for his/her expenses. We solemnly declare that he/she has not lost, surrendered or been deprived of his/her citizenship of India and that the information given in respect of him/her in this application is true. It is also certified that the name of the child mentioned is not included in Passport of either parent.

AND

OR

Mother

Father

Guardian

Name & Signature/T.I. of both the Parents/Guardian

Rajput/Date