



**CONSULATE GENERAL OF INDIA  
SAN FRANCISCO**

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Additional form to be filled in by Non-Residents/Visitors in U.S.A.  
along with Visa application form.

**FAX**

FROM : Consulate General of India, San Francisco

SURNAME/FAMILY NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ Gender : \_\_\_\_\_

NAME OF FATHER/SPOUSE: \_\_\_\_\_

NATIONALITY : \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ Place of birth: \_\_\_\_\_

PASSPORT NO.: \_\_\_\_\_

DATE OF ISSUE: \_\_\_\_\_ PLACE OF ISSUE: \_\_\_\_\_

PROFESSION/OCCUPATION: \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_

\_\_\_\_\_ Phone : \_\_\_\_\_

PURPOSE OF VISIT \_\_\_\_\_

TYPE OF VISA REQUIRED: \_\_\_\_\_ PERIOD: \_\_\_\_\_

**(FOR OFFICIAL USE ONLY)**

DATE: \_\_\_\_\_

TO : \_\_\_\_\_

With the request to convey your no objection to grant visa to above applicant  
urgently.If no reply is received within 72 hours of the issue of this message, your  
clearance shall be presumed and visa issued as per relevant /local checks.