



File Number (For Office Use Only)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

## GOVERNMENT OF INDIA, MINISTRY OF EXTERNAL AFFAIRS

## PASSPORT APPLICATION FORM

Please read the Passport Instruction Booklet carefully before filling the form. Fill this form in CAPITAL LETTERS using blue/black ink ball point pen only. Furnishing of incorrect information/ suppression of information would lead to rejection of the application and would attract penal provisions as prescribed under the Passports Act, 1967. Please produce your original documents at the time of submission of the form.

## Service Required

Application Reference Number 19-1002558983

Applying For REISSUE

If Re-issue, specify reason(s) CHANGE IN EXISTING PERSONAL PARTICULARS

If change in existing personal particulars, specify GIVEN NAME , SURNAME , OTHER

If other, specify NAME BIFURCATION

Type of Application TATKAAL

Type of Passport Booklet JUMBO

Please paste your  
unsigned recent color  
photograph of size  
4.5cm \* 3.5cm.

## Applicant Details

Applicant's Name TAMMINENI RAKESH

Date of Birth (DD/MM/YYYY) 15/01/1996

Validity Required NA

Place of Birth (Village/Town/City) TADIPATRI

District ANANTAPUR

State/UT ANDHRA PRADESH

Country INDIA

Gender MALE

Marital Status SINGLE

Citizenship of India by BIRTH

PAN BPHPR0018E

Employment Type PRIVATE

Is either of your parent (in case of minor)/spouse, a government servant? N

Educational Qualification GRADUATE AND ABOVE

Are you eligible for Non-ECR category? Y

Visible Distinguishing Mark MOLE ON RIGHT HAND

Aadhaar Number 394783803094

Signature/Left Hand Thumb Impression  
of Illiterate Applicant and Minors who  
cannot sign.

**Family Details**

Father's Name SURESH KUMAR TAMMINENI  
Mother's Name NAGAMANI TAMMINENI

**Present Residential Address Details**

Address 15,7TH CROSS,MATHRU LAYOUT,YELHANKA NEW TOWN,  
BENGALURU, YELAHANKA NEW TOWN, BENGALURU,  
KARNATAKA  
PIN 560065  
Mobile/Tel No. 8296865364  
E-mail TAMMINENIRAKESH@GMAIL.COM

**Permanent Residential Address**

Address 15,7TH CROSS,MATHRU LAYOUT,YELHANKA NEW TOWN,  
BENGALURU, YELAHANKA NEW TOWN, BENGALURU,  
KARNATAKA  
PIN 560065  
Mobile/Tel No. 8296865364

**Emergency Contact Details**

Name and Address SURESH KUMAR, DOOR NO 15,7TH CROSS, MATHRU  
LAYOUT, YELHANKA NEW TOWN, BENGALURU  
Mobile/Tel No. 7829087222  
E-mail SURESH.TAMMINENI67@YAHOO.COM

**Previous Passport****Details of latest held/existing/lost/damaged Ordinary Passport**

Passport Number R9495734  
Date of Issue 14/02/2018  
Date of Expiry 13/02/2028  
Place of Issue BENGALURU  
File Number BN1060877327718

**Payment Details**

Mode of Payment Debit/Credit Card  
Date 13/03/2019  
Receipt/Reference No. CPO4863903  
Amount Received (Rs.) 2000.00 (TWO THOUSAND ONLY)

**Enclosures**

- 1.Aadhaar Card/E-Aadhaar
- 2.Aadhaar Card/e-Aadhaar containing the 12 digit Aadhaar number issued by the Unique Identification Authority of India(UIDAI)
- 3.Standard Affidavit as per Annexure E

**Self Declaration**

I owe allegiance to the sovereignty, unity and integrity of India, and have not voluntarily acquired citizenship or travel document of any other country. I have not lost, surrendered or been deprived of the citizenship of India and I affirm that the information given by me in this form and the enclosures is true and I am solely responsible for its accuracy, and I am liable to be penalized or

prosecuted if found otherwise. I am aware that under the Passports Act, 1967 it is a criminal offence to furnish any false information or to suppress any material information with a view to obtaining passport or travel document.

Place                      BENGALURU

Date                        12/03/2019

Signature/Left Hand Thumb Impression of  
Applicant (If applicant is minor, either parent  
to sign)

