



File Number (For Office Use Only)

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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 17-0005654280
Applying For FRESH
Type of Application NORMAL
Type of Passport Booklet NORMAL

Applicant Details

Applicant's Name AKSHAY DILIP PAKHARE
Date of Birth (DD/MM/YYYY) 13/05/1992
Validity Required NA
Place of Birth (Village/Town/City) PALGHAR
District PALGHAR
State/UT MAHARASHTRA
Country INDIA
Gender MALE
Marital Status SINGLE
Citizenship of India by BIRTH
PAN BMNPP3770Q
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
Aadhaar Number 963074522785

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

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

Family Details

Father's Name DILIP PANDURANG PAKHARE
Mother's Name NANDA DILIP PAKHARE

Present Residential Address Details

Residing Since(MM/YYYY) 08/2010

| | |
|-----------------------------------|--|
| Address | A/503, SAI PRASAD ENCLAVE, PLOT NO-27, SECTOR-7, KAMOTHE, KAMOTHE, NAVI MUMBAI, MAHARASHTRA |
| PIN | 410209 |
| Mobile/Tel No. | 9594499050 |
| E-mail | AKSHAY.PAKHARE@GMAIL.COM |
| First Reference Name And Address | ANURAG ASHOK GODHA, A-502, SAI PRASAD ENCLAVE, PLOT NO-27, SECTOR-7, KAMOTHE, NAVI MUMBAI-410209 |
| Mobile/Tel No. | 9920731985 |
| Second Reference Name And Address | BHASKAR RAMESH PAWAR, A-501, SAI PRASAD ENCLAVE, PLOT NO-27, SECTOR-7, KAMOTHE, NAVI MUMBAI-410209 |
| Mobile/Tel No. | 9867911844 |

Emergency Contact Details

| | |
|------------------|--|
| Name and Address | DILIP PAKHARE, A/503, SAI PRASAD ENCLAVE CO-OP HSG SOC.LTD., PLOT NO-27, SECTOR-7, KAMOTHE, NAVI MUMBAI-410209 |
| Mobile/Tel No. | 8108778753 |

Fee Details (Not to be filled by applicants submitting the application at Passport Seva Kendra/Passport Office)

Fee amount in (Rs)

If paid by Demand Draft(DD), provide the following details

DD Issue Date (dd/mm/yyyy)

DD Expiry Date (dd/mm/yyyy)

Bank Name

Branch

Enclosures

- | | |
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| 1. | 6. |
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| 5. | 10. |

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

KAMOTHE, NAVI
MUMBAI

Date

31/05/2017

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

Print

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