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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 21-0000387220

Applying For **FRESH**

NORMAL Type of Application

Type of Passport Booklet **NORMAL**

Applicant Details

SHUBHAM VILAS WAGHMARE Applicant's Name

Date of Birth (DD/MM/YYYY) 28/04/2002

Validity Required NA

Place of Birth (Village/Town/City) **BHOKAR**

District **NANDED**

State/UT **MAHARASHTRA**

INDIA Country

Gender MALE

SINGLE Marital Status

Citizenship of India by **BIRTH**

PAN AHJPW4949A

Employment Type STUDENT

Is either of your parent (in case of

Υ minor)/spouse, a government servant?

Educational Qualification 10TH PASS AND ABOVE

Are you eligible for Non-ECR category?

Aadhaar Number 553704422324

Family Details

VILAS MALU WAGHMARE Father's Name

Mother's Name VANDANA VILAS WAGHMARE

Present Residential Address Details

Address ROAD BY PASS ROAD, NEAR ASHRAM SCHOOL, BHOKAR.

BHOKAR, NANDED, MAHARASHTRA

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.

1/12/2021 View/Print Submitted Form

PIN 431801

Police Station BHOKAR

Mobile/Tel No. 9325479318

E-mail WAGHMARESHUBHAM043@GMAIL.COM

Permanent Residential Address

Address ROAD BY PASS ROAD, NEAR ASHRAM SCHOOL, BHOKAR,

BHOKAR, NANDED, MAHARASHTRA

PIN 431801

Police Station BHOKAR

Mobile/Tel No. 9325479318

Emergency Contact Details

Name and Address SAICHANDRA VILAS WAGHMARE & MAHARANA PRATAP

SINGH CHOWK, BYPASS ROAD BHOKAR 431801

Mobile/Tel No. 8857969054 / 9764818862

E-mail SAICHANDRAWAGHMARE0801@GMAIL.COM

Other Details

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

- 1.Aadhaar Card/E-Aadhaar
- 2.Aadhaar Card (Address Proof)

Self Declaration

I owe allegiance to the sovereignty, unity & 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. I have not contravened any of the conditions relating to the possession and use of an Indian passport.

I affirm that the information and particulars given by me in this form are true and correct. I further state that I am not suppressing any material information in this regard. I further affirm that the enclosures and documentary proof submitted in support of my application for an Indian passport are authentic and solely pertain to me and I am fully responsible for the accuracy of the same. 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.

I have read and understood the contents of the above and by submitting this form certify that all the information submitted by me in the form is bonafide.

Place BHOKAR Signature/Left Hand Thumb Impression of

Applicant (If applicant is minor, either parent

Date 12/01/2021 to sign)