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## FILE OPENING FORM

**REF: ENQ836**

### Client Details

<b>Full Name:</b>	Dr. Balkrishna singh, Rajesh singh
<b>Date of Birth (D.O.B):</b>	10 Nov 1778
<b>National of:</b>	NEPAL
<b>Applicant Current address:</b>	janakpurdham, Nepal
<b>Mobile:</b>	1478526999
<b>Email:</b>	bal@mail.com

**I agree to this does it matter matter being opened.**

**I agree my case/file information can be discussed or shared with the following individual:**

<b>Authorised person's name:</b>	rupak
<b>Relationship to client:</b>	uncle
<b>Address:</b>	19th north london
<b>Tel/Mobile:</b>	rupak@mail.com
<b>Email:</b>	rupak@mail.com
<b>Authorisation word:</b>	NEPAL

**Signature:**

**Date: 17/09/2025**