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NOTE: ADDITIONAL FORM TO BE FILLED IN BY NON SINGAPOREAN NATIONALS IN BOLD AND CAPITAL LETTERS ALONG WITH APPLICATION FORMS

DIRECT VISA SECTION FAX NO. +(65) 6732 1462 DATE
FROM: HCI SINGAPORE
TO: CGI/HCI/INDEMBASSY/
THE FOLLOWING NATIONAL HAS APPLIED FOR
NAME:
FATHER'S NAME:
PLACE OF BIRTH: SEX: SEX:
DATE OF BIRTH: NATIONALITY:
PASSPORT NO: PLACE OF ISSUE:
DATE OF ISSUE: DATE OF EXPIRY:
OCCUPATION :
SINGAPORE WP/EP/PR (PASS) NO: (If any specify please)
PERMANENT ADDRESS: (in the country of origin)
GRATEFUL FOR "NO OBJECTION" AT THE EARLIEST. IN CASE WE DO NOT HEAR FROM YOU WITHIN 72HRS. WE INTEND TO ISSUE VISA TO THE

Assistant Consular Officer
HIGH COMMISSION OF INDIA
SINGAPORE