

Receipt No. :

EMBASSY OF INDIA

ASUNCION

APPLICATION FOR MISCELLANEOUS SERVICES

Affix Photo Here

1.	Full Name	:				
2.	Father's/Husbands Name	:				
3.	Date of Birth	:				
4.	Nationality	:		Place of Birth	:	
5.	Permanent Address in India, if any	:				
	Contact No.	:				
6.	Present Address in Paraguay	:				
	Contact No.	:		Email Id	:	
7.	Details of Current Passport :					
	Passport Numnber	:		Place of Issue	:	
	Date of Issue	:		Valid Until	:	
8.	Details of OCI Card, if any:					
	OCI Card Number	:		Place of Issue	:	
	Date of Issue	:		Valid Until	:	
9.	Services required: Please indicate (Tick)					
a.	Attestation of Documents					
b.	Affidavit (Please specify the purpose					
c.	Police Clearance Certificate (please specify country)					
d.	Power of Attorney					
e.	Renunciation					
f.	Other Miscellaneous Services					

* Applicant/s please attach : Copy of Passport, copy of OCI, Copy of Work Permit, one extra photograph.

* In case of joint affidavit/ Power of Attorney, details of each applicant may be provided overleaf:

Date: _____/_____/_____

Place: Nairobi

T.I /Signature of Applicant

FOR OFFICE USE ONLY			
Name of Service		Amount	
Date		Signature of Official	

APPLICANT 2 :

				Affix Photo Here	
1.	Full Name	:			
2.	Father's/Husbands Name	:			
3.	Date of Birth	:			
4.	Nationality	:	Place of Birth	:	
5.	Permanent Address in India, if any	:			
	Contact No.	:			
6.	Present Address in Kenya	:			
	Contact No.	:	Email Id	:	
7.	Details of Current Passport :				
	Passport Numnber	:	Place of Issue	:	
	Date of Issue	:	Valid Until	:	
8.	Details of OCI Card, if any:				
	OCI Card Number	:	Place of Issue	:	
	Date of Issue	:	Valid Until	:	

Signature

APPLICANT 3 :

				Affix Photo Here	
1.	Full Name	:			
2.	Father's/Husbands Name	:			
3.	Date of Birth	:			
4.	Nationality	:	Place of Birth	:	
5.	Permanent Address in India, if any	:			
	Contact No.	:			
6.	Present Address in Kenya	:			
	Contact No.	:	Email Id	:	
7.	Details of Current Passport :				
	Passport Numnber	:	Place of Issue	:	
	Date of Issue	:	Valid Until	:	
8.	Details of OCI Card, if any:				
	OCI Card Number	:	Place of Issue	:	
	Date of Issue	:	Valid Until	:	

Signature