

**GOVT. OF ARUNACHAL PRADESH
DEPARTMENT OF HOME
ITANAGAR.**

REQUEST FOR SPECIAL PERMIT FOR PROTECTED/RESTRICTED AREAS

- 1). Name of the MR./MRS/MISS _____
(In capital letters, surname
Underlined)
- 2). Father's/Husband's Name MR./MRS _____
- 3). Place & date of birth (Town
& Country) _____
- 4). Nationality
1. _____
2. _____
- 5). Occupation (give also address
Of place of work (employee) _____
- 6). **Mailing address in India**
(If any) _____
- 7). Present Address _____
- 8). Permanent Address _____
- 9). References:
A). In the country of applicant
B). In India _____
- 10). Passport Details: -
Number _____
Issued By _____
Valid Unto _____
- 11). Details of Visa for India, If any obtained: No. _____
Issued by _____ Valid Upto _____
- 12). Places proposed to be visited _____

(2)

- 13). Route intended to be followed while entered/
Leaving the restricted/protected areas.
- 14). Likely date of Visit _____
- 15). Purpose of Visit _____
- 16). Likely duration of Visit _____
- 17). If anyone accompanying the accommodation
That has been made _____
- 18). Arrangement for travel and accommodation
That has been made _____
- 19). Details of previous visit to India, If any _____
- 20). Has He/she/They previously visited any
Restricted/protected area in India,
If so give details. _____
- 21). Has any earlier request for permit been refused.
If so give details + _____
- 22). For Pakistani Nationals only:
a). Parentage: _____
b). Place of Birth: _____
c). Date of Birth: _____

The information given above is correct a complete to the best of my knowledge.

SIGNATURE OF THE APPLICANT

Note: -

- 1). This application is to be sent to the Home Commissioner. Govt of Arunachal Pradesh.
- 2). It is advisable to me the application at least eight weeks before the proposed Visit
- 3). Applications outside India are excepted to route through the nearest Indian Missions.
- 4). Photograph of the applicant must be enclosed in the case of request for Protected Area Permit.