



**VISA SECTION**

**EMBASSY OF INDIA, ROME**

**Telephone/ Fax: 0039 - 06 - 4824252**

**APPLICATION FOR SPECIAL PERMIT (For Restricted/Protected Area)**

1. Name of Applicant (Mr/ Mrs/Miss): \_\_\_\_\_
2. Nationality : \_\_\_\_\_
3. Occupation : \_\_\_\_\_  
(If Government employee, appointment held)
4. (a) Address in India : \_\_\_\_\_  
(b) Address abroad : \_\_\_\_\_
5. Passport No.: \_\_\_\_\_ Date: \_\_\_\_\_  
Place of Issue: \_\_\_\_\_
6. (a) Place(s) within the proposed Restricted/Protected Area to be visited: \_\_\_\_\_  
\_\_\_\_\_  
(b) Address in the Restricted/Protected Area: \_\_\_\_\_
7. Period of proposed visit: From \_\_\_\_\_ to \_\_\_\_\_
8. (a) Route intended to be followed while entering/leaving the  
Restricted/Protected Area: \_\_\_\_\_  
(b) Mode of Journey: \_\_\_\_\_
9. Purpose of Visit : \_\_\_\_\_
10. Whether applied for a permit to visit  
restricted or inner-line area before.  
If so, details thereof. Also indicate  
whether permit was granted and for  
what period: \_\_\_\_\_

Dated: / /

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**Signature of the Applicant**