

APPLICATION FORM

1. Name of the Visitor:
2. Designation with Grade Pay/Level:
3. Ministry/Department /Office where working:
4. Office address:
5. Mobile No.: (a) Visitor : _____ (b) Emergency Contact : _____
6. Postal/Residential address:
7. Email ID:
8. Period of booking (Max 5 nights): From _____ to _____
9. Check out date _____ Check out time _____
10. Purpose of visit (Pl. Tick): Official Tour at AIIH&PH/ Official Tour at Other Places/ Private Visit.
(For official tour, enclose a copy of the office Order or Approved TP)
11. Type of Accommodation required (Please tick) Double Bed/Single Bed/Suite* [* check the eligibility]
12. Details of other visitors accompanying the main visitor, if any:

Sl. No.	Name	Address with Mobile No.	Relationship with the Visitor

DECLARATION BY THE APPLICANT

I certify that the information given above is correct and that nothing has been concealed. I certify that the accommodation asked for in the Guest House will be occupied by me and other members mentioned in the application form. I undertake to vacate the accommodation on (FN) of the declared Checkout date and will not overstay without prior written permission of Allotting Authority. I shall abide by the prescribed Rules/Orders/Terms and Conditions, covering this booking/allotment.

Date: _____

Place: _____

Signature of the Applicant

Name, address and mobile no. of the applicant (if the visitor is not the applicant):

(In case of Official Tour application should be forwarded by the Controlling Authority with Official Seal)

For Official Use Only

Application Checked and found in Order:

Signature of the Concerned Official

Whether Accommodation allotted: Yes/ No.

Room No. / Suite No. Allotted:

Signature of the Concerned Official