



THE SIALKOT CHAMBER OF COMMERCE & INDUSTRY

P.O.BOX 1870, SHAHRAH-E-AIWAN-E-SANAT-O-TIJARAT, SIALKOT-51310, PAKISTAN

Tele (052) 4261881-3, Fax # +92-052-4268835, 4267919, Gram: Commerce

E-Mail : sialkot@sccl.com.pk, Website : www.sccl.com.pk

APPLICATION FORM FOR ISSUANCE OF VISA RECOMMENDATORY LETTER

PHOTOGRAP OF THE
APPLICANT TO BE
PASTED

1. NAME OF FIRM _____
2. ADDRESS OF THE FIRM _____

3. YEAR OF MEMBERSHIP _____ CLASS OF MEMBERSHIP _____ MEMBERSHIP NO. _____
4. NAME OF APPLICANT _____ PHONE NO. _____
5. APPLICANT'S RELATIONSHIP WITH THE FIRM _____ PASSPORT NO. _____
ISSUED AT _____ DATE OF ISSUE _____ DATE OF VALIDITY _____
6. NATURE OF BUSINESS _____
7. NAME OF COUNTRY/COUNTRIES FOR WHICH RECOMMENDATION IS REQUIRED:
 - a) _____ e) _____
 - b) _____ f) _____
 - c) _____ g) _____
 - d) _____ h) _____
8. EXPORT/IMPORT PERFORMANCE DURING THE LAST 3 YEAR _____
9. DOCUMENTARY EVIDENCE OF PURPOSE OF VISIT _____

I HEREBY DECLARE THAT THE ABOVE INFORMATION IS CORRECT.

**SIGNATURE/STAMP OF FIRM'S AUTHORIZED
REPRESENTATIVE IN CHAMBER**

SIGNATURE OF APPLICANT

FOR OFFICE USE ONLY

1. PASSPORT NO. _____
2. NATIONAL IDENTITY CARD NO. _____
3. EXPORT/IMPORT PERFORMANCE _____
4. F.EXCH:APPROVED _____
5. UNDERTAKING _____
6. CHAMBER DUES _____