## UNDERTAKING FOR THE CASES WHERE THE PASSPORT IS WITHELD BY THE HOME OFFICE.

## (A Letter from the Home Office with the reason for retention of Indian Passport to be submitted with this undertaking)

| I Mr/Mrs/Ms  |  | (DO  | B: /                                  | /                                  | ) here                                | ebv                     |
|--|--|--|---------------------------------------|------------------------------------|---------------------------------------|-------------------------|
| declare that my Passport No:   | issued   | on   |                                       |                                    | fr                                    | om                      |
| , which is to expire/exp   |  |  |                                       |                                    |                                       |                         |
| currently withheld by the Home   |  |  |                                       |                                    |                                       |                         |
| I am aware that, since there cannot be two any given point in time. Thus I request yo under the Lost Passport category, where cancelled in the government systems and trissuance of a new passport/travel docume with the Home Office. | u to plea<br>my passp<br>eated as '<br>nt to me, | se actors with the second seco | cept r<br>vill aut<br>Passpo<br>eu of | ny ap<br>comat<br>ort' be<br>passp | plicat<br>ically<br>efore t<br>ort ly | ion<br>be<br>the<br>ing |
| I understand that the High Commission of In<br>for the outcome of my pending visa application<br>passport submitted with the visa application<br>the government systems and treated as 'Los  | ation with<br>n will auto                        | n the<br>omati   | Home                                  | Offic                              | e as t                                | the                     |
| I clearly understand that whatever the out the fee & other charges paid for this applicate   |  |  |                                       |                                    | olicatio                              | on,                     |
| Signature :-<br>Name :-  |  |  |                                       |                                    |                                       |                         |
|  |  |  |                                       |                                    |                                       |                         |

PLACE:-

DATE:-