

FORM 'L'

Office _____

Tele _____

APPLICATION FOR ISSUE OF VISITOR'S SLIP/DUTY PASS

- 1. (a) Name of the Visitor :
- (b) Address of the Visitor :
- (c) Name and appointment of the officer being visited:
- (d) Date and time of visit :
- (e) Purpose of visit :

OR

2. Shri/Smt/Km _____ has joined this office on permanent posting/temporary duty. A "duty Pass" in his/her respect may please be prepared for _____ days (maximum of Ten days) and handed over to Shri/Smt/Km _____ whose SLAC No. is _____

*Note : Strike out, if not applicable.



Date:

Reception Office
_____ Block/Bldg

(Group 'A' Civilian officer/
Commissioned Service officer)

Name _____

Rank Designation _____

Office _____

Room No. _____

Block/Bldg _____

Tele: _____