

DECLARATION FORM

I, (full name), hereby declare that I am physically present in France on the date of making this application, and that all the information provided by me in this application is **true, accurate and complete** to the best of my knowledge.

I understand that my visa application is being submitted **directly to the Embassy / Consulate of India in France**, and that the **grant or refusal** of any visa service **is at the sole discretion** of the Embassy / Consulate. I acknowledge that the processing of my application, including the processing time, is subject to the **procedures and timelines** set by the Embassy of India, Paris and that these may vary or change without prior notice.

I accept that **visa fees are non-refundable**, regardless of the outcome of the application, and that payment of such fees is **required even if the visa is not granted**. I understand that the **Embassy / Consulate of India, Paris assumes no responsibility** for any delays in processing or delivery, or for **any travel-related losses or expenses**, including but not limited to air, rail, or hotel bookings made in anticipation of receiving a visa.

I further declare that I am **personally responsible** for the **accuracy and completeness** of my application and supporting documents. I understand that even if my documents are reviewed by consular staff, this does **not guarantee identification of any errors or omissions**, and that the Embassy / Consulate is not responsible for verifying the truth or completeness of the information I have provided.

I understand and accept that any **false information, misrepresentation, or suppression of material facts** may result in the denial or cancellation of visa services without notice and without the obligation to provide reasons.

I acknowledge that my personal data may be processed by the Embassy / Consulate of India in accordance with applicable data protection laws, and I consent to the handling of my data for the purposes of this application, including background verification or sharing with relevant authorities if required under Indian or French law.

It is my responsibility to ensure that I hold the appropriate visa and travel documents before making travel arrangements, and I understand that the Embassy / Consulate of India shall **not be liable for any financial loss, cancellation charges, or other travel-related expenses** incurred due to the delay, denial, or rejection of visa services.

Date:

Place:

Signature of Applicant:

Full Name (in capital letters):

Passport Number: