



**MINISTRY OF FOREIGN AFFAIRS OF THE REPUBLIC OF TAJIKISTAN
STATE PROTOCOL DEPARTMENT**

APPLICATION FORM

for Permission on Entry, Possession and Carrying of Weapons for Security Services Officers of Foreign State

DELEGATION INFORMATION

Country:

Head of delegation:

The purpose of visit:

Address:

Contact phone No:

E-mail:

VISIT INFORMATION

City of arrival:

Date and time of arrival:

Flight information:

City of departure:

Date and time of departure:

Flight information:

№	Name and surname	Position, rank	Serial No. of weapon	Type of weapon	Rounds	Caliber
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						