



# makalu ADVENTURE TREKS pvt. LTD.

Post Box: 20144 Tel: 977-1-4417522 Fax: 977-1-4417524  
Thamel, Kathmandu, Nepal

## Schedule –1

(Relating to sub rule (1) of Rule 3)

### Application to be submitted for mountaineering expedition

To,  
The Ministry of Culture, Tourism and Civil Aviation

I hereby submit an application for permit including following details with a desire to climb the ..... Mountain, having height of ..... situated in the kingdom of Nepal, from 20..... to .....

1. Name of the mountaineering expedition team: .....
2. Name, number and passport number of the mountaineering expedition team: .....(Attached).....
3. Leader of the mountaineering expedition team: .....
4. Mother-tongue of the team member of the mountaineering expedition team: .....
5. Name of the country of the member of the mountaineering expedition team: .....
6. Sponsor of the mountaineering expedition: .....
7. Purpose of the mountaineering expedition: .....
8. Name and height of the mountain to be climbed: .....
9. Caravan route for the mountaineering expedition: .....
10. Route of mountaineering expedition: ..... (Attached) .....
11. Time and duration of the mountaineering expedition: .....
12. Tentative number of headman, mountain Guide, high altitude worker, base camp worker and local worker: .....
13. Number of worker and other people going beyond the base camp: .....
14. Estimated expenditure and financial source of such mountaineering expedition: .....
15. Approximate weight of the equipment to be used and their number .....
16. Medium of contact in Kathmandu: (**Makalu Adventure Pvt. Ltd. / Tel: 4417522, 4420136 / Fax: 4417524**)
17. Name and address of the Trekking Agency making necessary arrangement for the mountaineering expedition:  
**Makalu Adventure Pvt. Ltd. / Tel: 4417522, 4420136 / Fax: 4417524**
18. Means of transport for the mountaineering expedition equipment:  
(a) Outside the Kingdom of Nepal: .....
- (b) Within the Kingdom of Nepal: Local Porters
19. Nature of means of communication to be used and their number: .....
20. Other necessary details:

Applicant's

Signature:-

Name:-

Address:-

Mailing Address:-

Office:- (Phone no., Fax, E-mail)

Residence (Phone no., Fax, E-mail)

Date:-

Address for correspondence:

Date:

Document to be submitted with application : Map of the area where the mountain is situated