



VIP PASSPORT SERVICES, INC.

2012 Louisiana Street
Houston, Texas 77002

713-659-8472 1-800-856-8472 Fax 713-659-3767

Website: www.vippassports.com Email: info@vippassports.com

WORK ORDER REQUEST FORM

(RETURN THIS FORM WITH EACH REQUEST)

BILLING INFORMATION:

CONTACT: _____
COMPANY: _____
ADDRESS: _____
CITY/ST: _____
PHONE: _____
CELL: _____
FAX: _____
EMAIL: _____

RETURN DOCUMENTS TO:

CONTACT: _____
COMPANY: _____
ADDRESS: _____
CITY/ST: _____
PHONE: _____
CELL: _____
FAX: _____
EMAIL: _____

CREDIT CARD INFORMATION:

CARD#: _____
EXP. DATE: _____ CVV#: _____

**SIGNATURE OF CARD HOLDER
REQUIRED:** _____

BILLING INSTRUCTIONS:

YOUR P.O. OR REF#: _____

**AUTHORIZED AMOUNT TO CHARGE MY
CREDIT CARD: US\$** _____

TRAVELERS NAME: _____

DATE OF USA DEPARTURE: _____

DATE OF BIRTH: _____

DATE YOU NEED PASSPORT: _____

VIP RESERVATION/FILE LOCATOR NUMBER: _____

SPECIAL INSTRUCTIONS: _____

HOW DID YOU HEAR ABOUT VIP?

REPEAT CUSTOMER__ INTERNET__ REFERRED__ BY_____ WALK-IN_____



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BOLIVIA TOURIST VISA (U.S. PASSPORT HOLDER)

DOCUMENTS REQUIRED:

VALID SIGNED PASSPORT:	<u>1</u>	VISA APPLICATION:	<u>1</u>
PASSPORT TYPE PHOTO:	<u>1</u>	TRAVEL ITINERARY:	<u>1-COPY</u>
HOTEL CONFIRMATION:	<u>1-NEXT PAGE</u>	BANK STATEMENT:	<u>1-COPY</u>
INVITE LETTER:	<u>1-NEXT PAGE</u>	POLICE CLEARANCE:	<u>N/A</u>
EMPLOYER LETTER:	<u>N/A</u>	INT'L HEALTH CERTIFICATE:	<u>1-COPY</u>

OTHER: PLEASE SEE NEXT PAGE FOR MORE DETAILED INSTRUCTIONS.

PLEASE FORWARD THIS SHEET AND ALL THE ABOVE REQUIREMENTS TO THE ABOVE LISTED ADDRESS

FEES PER PERSON:

VIP SERVICE FEE: (REGULAR PROCESS)	<u>\$75.00</u>
CONSULATE FEE:	<u>\$160.00</u>
MONEY ORDER:	<u>\$6.00</u>
** <input type="checkbox"/> SPECIAL HANDLING FEE: (LESS THAN 4 DAY RUSH PROCESS)	<u> </u>
*ADD RETURN FEDEX FEE:	<u> </u>
TOTAL: (NO PERSONAL CHECKS PLEASE)	<u> </u>

*FEDEX FEES:

PRIORITY LETTER	\$29.00
2-DAY LETTER	\$23.50
3-DAY LETTER	\$19.50
SATURDAY LETTER	\$41.50
1 ST OVERNIGHT DELIVERY	\$75.00

**VISA PROCESSING TIME

REGULAR PROCESSING TIME: 4 TO 7 DAYS

PLEASE MARK THE APPROPRIATE BOX IF YOU NEED VIP TO REQUEST TO HAVE THE VISA ISSUED IN LESS THAN 4 DAYS FROM THE DAY THE APPLICATION IS SUBMITTED (\$20.00 SPECIAL HANDLING FEE).

COMMENTS: PLEASE DO NOT PURCHASE NON-REFUNDABLE OR NON-CHANGEABLE AIRLINE TICKETS UNTIL THE VISA HAS BEEN ISSUED AND THE PASSPORT IS IN HAND.

REVISED: 02-26-2017 (SDL)



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BOLIVIA TOURIST VISA

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS:

1.) **U.S. PASSPORT**

- MUST HAVE AT LEAST 1 BLANK VISA PAGE
- MUST HAVE AT LEAST 6 MONTHS REMAINING VALIDITY

2.) **ONE (1) CURRENT PASSPORT-TYPE PHOTOGRAPH** WITH WHITE BACKGROUND (2x2)

3.) **ONE (1) COMPLETED APPLICATION** (*SEE FORM BELOW*)

4.) **COPY OF MOST RECENT BANK STATEMENT**

5.) **CLEAR COPY OF APPLICANT'S STATE-ISSUED DRIVER'S LICENSE**

6.) **COPY OF TRAVEL ITINERARY**

7.) **COPY OF INVITATION** (*IF VISITING FRIENDS AND/OR FAMILY*)

- MUST INDICATE ADDRESS OF BOLIVIAN CONTACT

8.) **HOTEL CONFIRMATION** (*IF NOT VISITING/STAYING WITH FRIEND/FAMILY*)

9.) **INTERNATIONAL HEALTH CERTIFICATE** *IF YOU ARE PLANNING TO VISIT ONE OF THE TROPICAL AREAS IN BOLIVIA YOU WILL BE REQUIRED TO SUBMIT A COPY OF THE INTERNATIONAL HEALTH CERTIFICATE SHOWING INOCULATIONS FOR YELLOW FEVER ALONG WITH THE APPLICATION (PLEASE [CLICK HERE](#) TO DETERMINE IF YOUR DESTINATION WILL REQUIRE THAT YOU SUBMIT A COPY OF THE INTERNATIONAL HEALTH CERTIFICATE)*

10.) **CONSULATE FEE: \$160.00**

VALIDITY: TOURIST VISAS ARE USUALLY VALID FOR SINGLE-ENTRY FOR 90 DAYS, OR MULTIPLE ENTRY VALID UP TO ONE YEAR. VISAS TYPICALLY ALLOW A STAY OF UP TO 30 DAYS. THE VALIDITY OF THE VISA IS ISSUED AT THE SOLE DISCRETION OF THE VISA OFFICER.

REVISED: 02-26-2017 (SDL)

Specializing in Visas, Passports, Document Legalization and Translations



Ministerio de Relaciones Exteriores y Cultos de Bolivia
 Viceministerio de Relaciones Exteriores y Cultos
 Dirección General de Régimen Consular
 www.rree.gob.bo



Ministerio de Gobierno
 Viceministerio de Régimen Interior
 Dirección Nacional de Migración
 www.migracion.gob.bo

2" x 2"
 Passport
 Picture

No. _____

DECLARACIÓN JURADA DE SOLICITUD DE VISA SWORN STATEMENT FOR VISA APPLICATION

NOTA: No está permitido el cambio de status migratorio en Bolivia

NOTE: It is not allowed to change migratory status while in Bolivia

TIPO DE VISA REQUERIDA/TYPE OF VISA REQUESTED:

TURISTA/TOURIST
 ESTUDIANTE/STUDENT

OBJETO DETERMINADO/SPECIFIC PURPOSE
 EN TRANSITO

1. Apellidos/Surnames:		Primer nombre/First name:	Segundo nombre/Middle name:
Lugar de Nacimiento/ Place of Birth:		Nacionalidad/Nationality:	Estado civil/Marital status:
Fecha de Nacimiento/Date of Birth:		Ocupación /Occupation:	Casado(a)/Married <input type="checkbox"/>
(Opcional) Carnet de identidad/ (Optional) National Identification Number:			Soltero(a)/Single <input type="checkbox"/>
Clase y número de pasaporte/Passport type and number:			Viudo(a)/Widowed <input type="checkbox"/>
Lugar de emisión/Place of Issuance:			Divorciado(a)/Divorced <input type="checkbox"/>
Ciudad/City:	País/Country:		Fecha de emisión/Issuing date:
Dirección de Domicilio/Home Address:			
Teléfono de su residencia/Home phone number:			
Teléfono donde trabaja/Work phone number:			
Teléfono Celular/Mobile:			
Dirección electrónica/Email address:			
Solicitó visa anteriormente?/Have you applied before for a visa?:		Si/Yes <input type="checkbox"/> No <input type="checkbox"/>	
Dónde?/Where?		Cuánto tiempo desea permanecer en Bolivia?/How long do you intend to stay in Bolivia?	
Fecha/Date:			

Qué lugar le gustaría visitar? /Which place would you like to visit?:	Tiene familiares en Bolivia?/Do you have relatives in Bolivia?: Si/Yes <input type="checkbox"/> No <input type="checkbox"/>
	Nombre completo/Full name:
	Dirección/ address:
	Ciudad/City:
Teléfono/Telephone:	

(Opcional) Persona(s) de contacto en caso de emergencia/**(Optional)** In case of emergency, contact:

2. Nombre completo/Full name:		Empresa o Institución donde Trabaja o Estudia / Name of Business or Institution where you work or Study:	
Dirección donde vive/Home address:		Dirección donde trabaja o estudia /Work or School Address:	
Estado o Departamento/State or Province:		Estado o Departamento/State or Province:	
Código Postal/Postal Code:		Código Postal/Postal Code:	
País/Country:		País/Country:	
Teléfono / Telephone		Teléfono / Telephone	
3. Medio de Transporte/ Transportation:		Ruta/Route:	
Aéreo/Plane <input type="checkbox"/> Terrestre/Bus-Train-Other <input type="checkbox"/>		Fecha de Retorno/Date of return:	
Lugar de presentación de la solicitud / Place of application:	Día/Day	Mes/Month	Año/Year

Firma del solicitante
Applicant's Signature

Firma de la autoridad consular
Consul's Signature