



VIP SERVICES

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: _____

PHONE: _____
FAX: _____
EMAIL: _____

RETURN DOCUMENTS TO:

CONTACT: _____
COMPANY: _____
ADDRESS: _____

PHONE: _____
FAX: _____
EMAIL: _____

BILLING INSTRUCTIONS:

AMOUNT ENCLOSED FOR DEPOSIT: _____

YOUR COMPANY P.O. OR REF#: _____

CREDIT CARD INFORMATION:

TYPE OF CARD: _____
CARD #: _____
EXPIRATION DATE: _____

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

SIGNATURE OF CARD HOLDER
REQUIRED: _____

<u>VISA PROCESSING</u>	<u>AND</u>	<u>CONSULATE FEES:</u>
<u>LIST COUNTRIES</u>	<u>AND</u>	<u>CONSULATE FEES:</u>
_____	-	\$ _____
_____	-	\$ _____
_____	-	\$ _____

TRAVELERS NAME: _____

DATE OF USA DEPARTURE: _____

DATE YOU NEED PASSPORT: _____

SPECIAL INSTRUCTIONS: _____

HOW DID YOU HEAR ABOUT VIP?

REPEAT CUSTOMER__ INTERNET__ REFERRED__ BY _____ WALK-IN _____



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CENTRAL AFRICA REPUBLIC

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

TOURIST VISA:

- 1.) PASSPORT (MINIMUM OF 1 YEAR REMAINING VALIDITY)
- 2.) (2) TWO PASSPORT-TYPE PHOTOGRAPHS (2x2)
- 3.) (2) TWO COMPLETED APPLICATIONS
- 4.) A COPY OF YOUR ROUND TRIP AIRLINE TICKETS
OR TRAVEL ITINERARY
- 5.) YOUR INTERNATIONAL HEALTH CERTIFICATE SHOWING
A CURRENT YELLOW FEVER VACCINATION (A GOOD CLEAR
COPY WILL BE ACCEPTABLE)
- 6.) COPY OF INVITATION
- 7.) COPY FRONT AND BACK OF GREEN CARD OR ORIGINAL
I-94 AND USA VISA
- 8.) CONSULATE FEE: \$200.00

BUSINESS VISA:

- 1.) PASSPORT (MINIMUM OF 1 YEAR REMAINING VALIDITY)
- 2.) (2) TWO PASSPORT-TYPE PHOTOGRAPHS (2x2)
- 3.) (2) TWO COMPLETED APPLICATIONS
- 4.) A COMPANY LETTER OF GUARANTEE
- 5.) A COPY OF YOUR ROUND TRIP AIRLINE TICKETS
OR TRAVEL ITINERARY
- 6.) YOUR INTERNATIONAL HEALTH CERTIFICATE SHOWING
A CURRENT YELLOW FEVER VACCINATION (A GOOD CLEAR
COPY WILL BE ACCEPTABLE)
- 7.) COPY OF INVITATION
- 8.) COPY FRONT AND BACK OF GREEN CARD OR ORIGINAL
I-94 AND USA VISA
- 9.) CONSULATE FEE: \$200.00

VALIDITY: VISAS ARE VALID FOR A (90) NINETY DAY
MULTIPLE ENTRY AND ARE ISSUED ON A CASE BY
CASE BASIS.

REVISED: 04-02-2011 (KS)

Specializing in Visas, Passports, Document Legalization and Translations



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EXAMPLE OF A COMPANY LETTER OF GUARANTEE

DATE: _____

EMBASSY/CONSULATE OF: _____

GENTLEMEN:

MR. / MRS. (TRAVELER) IS ONE OF OUR EMPLOYEES WHO IS
ENGAGED AS (POSITION) FOR (COMPANY NAME). MR. / MRS.
(TRAVELER) PLANS TO VISIT (CITY) FOR THE PURPOSE OF (DETAILED
EXPLANATION OF TRIP) WITH (COMPANY TO BE VISITED).

MR. / MRS. (TRAVELER) WILL BE DEPARTING THE UNITED STATES ON
(DATE) AND WILL BE STAYING FOR (LENGTH OF TRIP). OUR COMPANY,
(EMPLOYER), WILL GUARANTEE MR. / MRS. (TRAVELER) MAINTENANCE
AND WILL BE RESPONSIBLE FOR HIS / HER WELFARE WHILE IN YOUR
COUNTRY. HE / SHE IS IN POSSESSION OF SUFFICIENT FUNDS FOR HIS / HER
STAY AND HAS PREPAID TRANSPORTATION TO RETURN TO THE UNITED
STATES.

WE WOULD BE VERY APPRECIATIVE IF YOU WOULD ISSUE MR. / MRS.
(TRAVELER) THE APPROPRIATE (SINGLE OR MULTIPLE) ENTRY BUSINESS VISA
AT YOUR EARLIEST CONVENIENCE.

THANK YOU,

(SUPERVISORS SIGNATURE)

PLEASE BE SURE THAT THE PERSON WHO AUTHORIZED YOUR TRIP SIGNS THIS
LETTER. THE TRAVELER SHOULD NOT SIGN THIS LETTER.
DO NOT ATTENTION THIS LETTER TO VIP SERVICES!

MINISTERE DES AFFAIRES ETRANGERES

AMBASSADE DE LA REPUBLIQUE CENTRAFRICAINE
A WASHINGTON, DC - USA

DEMANDE DE VISA/VISA APPLICATION

(à remplir lisiblement / please fill out the application readily)

Nom de Famille.....
Last Name

Né (e).....
Maiden Name

Prénoms.....
First Name

Né le à
Born on Place of Birth

Nationalité d'Origine Actuelle.....
Nationality at Birth Present Nationality

PHOTO

Situation de Famille..... Enfants: Nombre Age....
Marital Status Children: NumberAge ...

Domicile Habituel.....
Permanent Address

Résidence Actuelle.....
Present Address

No. de Téléphone.....
Telephone Number

Profession
Occupation

Nom et Adresse de l'Employeur.....
Name and Address of Employer

No. de Téléphone
Telephone Number

Situation Militaire.....
Military Status

Nature du Visa Sollicité.....
Type of Visa Requested

Transit avec Arrêt _____ jours Transit sans Arrêt ____
Transit with Stopover ____ day (s) Transit without Stopover ____

Court Séjour de ____ mois _____ entrée (s) ____
Short Stay of ____ month (s) ____ entry (ies) ____ day (s)

Long Séjour de un an avec _____ entré (es) ____ jour (s)
Long Stay one year with _____ entry (ies) ____ day (s)

Motif détaillé du voyage.....
Reason of the trip

Etes-vous déjà allé en RCA?.....
Have you already visited CAR ?

A quelle date?
If so, when?

Référence dans le pays de résidence.....
Reference in the country where you live

Indication précise du lieu d'entrée en RCA.....
Port of entry in CAR

Date prévue pour le voyage..... Mode de transport utilisé.....
Planned date for your visit Means of transportation

Adresse prévue en RCA.....
Planned address/contact in CAR

Comptez-vous installer un commerce ou une industrie en RCA ?.....
Are you considering or planning to start a business in CAR?

Vous engagez-vous à n'accepter aucun emploi rémunéré ou au pair durant votre séjour en RCA et à ne chercher à vous installer définitivement et à QUITTER LE TERRITOIRE DE LA RCA A L'EXPIRATION DU VISA qui vous sera éventuellement accordé.

I agree NOT to accept any remuneration for employment of any kind during my stay in Central African Republic, nor to seek permanent residence and I agree TO LEAVE THE COUNTRY AT THE EXPIRATION OF THE VISA which will eventually be granted to me.

Ma signature engage ma responsabilité et m'expose aux poursuites prévues par la Loi en cas de FAUSSE DECLARATION à me voir REFUSER TOUT VISA A L'AVENIR.

I certify that every statement made herein is true and correct and that any FALSE DECLARATION on my part may result in the denial of a further visa by the Central African Republic.

Fait à le
Done at on

Signature