



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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CHAD BUSINESS VISA U.S. PASSPORT HOLDER

DOCUMENTS REQUIRED:

VALID PASSPORT:	<u>1</u>	APPLICATION (S):	<u>2</u>
PASSPORT TYPE PHOTO (S):	<u>2</u>	TRAVEL ITINERARY:	<u>1-COPY</u>
INT'L HEALTH CERTIFICATE:	<u>N/A</u>	COMPANY LETTER:	<u>1</u>
COPY OF INVITATION:	<u>1</u>	RELEASE LETTER:	<u>N/A</u>

OTHER: 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></u>
MONEY ORDER:	<u>\$6.00</u>
** <input type="checkbox"/> SPECIAL HANDLING FEE: (1 TO 2 DAYS RUSH PROCESSING)	<u></u>
** <input type="checkbox"/> SPECIAL HANDLING FEE: (3 TO 4 DAYS RUSH PROCESSING)	<u></u>
OTHER FEES: _____	<u></u>
*ADD RETURN FEDERAL EXPRESS FEE:	<u></u>
TOTAL: (NO PERSONAL CHECKS PLEASE)	<u></u>

*FEDERAL EXPRESS 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:	<u>5 TO 7 DAYS</u>
PLEASE MARK THE APPROPRIATE BOX IF YOU NEED VIP TO REQUEST TO HAVE THE VISA ISSUED WITHIN 1 TO 2 DAYS (\$50.00 SPECIAL HANDLING FEE) OR THE 3 TO 4 DAYS RUSH PROCESSING FROM THE DAY THE APPLICATION IS SUBMITTED (\$20.00 SPECIAL HANDLING FEE).	

COMMENTS: _____

REVISED: 10-30-2015 (JENN)



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CHAD

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

BUSINESS VISA:

1.) U.S. PASSPORT

- MUST HAVE AT LEAST TWO BLANK VISA PAGES
- MUST HAVE MINIMUM OF 6 MONTHS REMAINING VALIDITY

2.) TWO (2) PASSPORT - TYPE PHOTOGRAPHS (2x2)

3.) TWO (2) COMPLETE APPLICATIONS

4.) COMPANY LETTER OF GUARANTEE (SEE NOTE BELOW)

5.) LETTER OF INVITATION (SEE NOTE BELOW)

6.) COPY OF TRAVEL ITINERARY

7.) CONSULATE FEE:

NUMBER OF ENTRIES	LENGTH OF VALIDITY	REGULAR PROCESSING FEE	3 TO 4 DAY RUSH PROCESSING FEE	1 TO 2 DAY RUSH PROCESSING FEE
SINGLE	30 DAYS	\$150.00	\$175.00	\$200.00
MULTIPLE	90 DAYS	\$200.00	\$225.00	\$250.00
	6 MONTHS	\$250.00	\$275.00	\$300.00

NOTE:

BE SURE TO INCLUDE IN BOTH THE COMPANY LETTER AND THE LETTER OF INVITATION WHAT TYPE OF VISA YOU ARE REQUESTING – EITHER THE 30 DAY SINGLE ENTRY, 90 DAY MULTIPLE ENTRY OR THE 6 MONTH MULTIPLE ENTRY VISA.

VALIDITY:

THE VALIDITY, TYPE OF VISA ISSUED, AND THE FEE PAID TO THE CONSULATE WILL DETERMINE THE TYPE OF VISA THAT YOU WILL RECEIVE

REVISED: 10-30-2015 (JENN)

AMBASSADE DU TCHAD
WASHINGTON, DC



DEMANDE DE VISA
(pour un séjour d'un jour à trois mois)

VISA n° _____ /ARTW/ _____

Nom <i>Name</i>	Attach a recent passport size photograph in this	
Prénom <i>First Name</i>		
Date et lieu de naissance <i>Date and place of birth</i>		
Nationalité actuelle <i>Nationalité d'origine</i>	Current citizenship <i>Citizenship at birth</i>	
Adresse <i>Address</i>		
Situation de famille <i>Marital status</i>	Nombre d'enfants <i>Number of children</i>	
Passeport n° <i>Passport #</i>	délivré le <i>issued on</i>	par <i>by</i>
A <i>In</i>	Valable jusqu'au <i>expires on</i>	
Profession <i>Profession</i>		
Nom de l'employeur <i>Employer's name</i>		
Motif du voyage <i>Reasons fro trip</i>		
Adresse durant le séjour au TCHAD <i>Address during the stay in CHAD</i>		
Durée du séjour <i>Duration of stay</i>	Date du départ <i>Date of departure</i>	
Avez - vous déjà séjourné au TCHAD ? Si oui, où et quand ? <i>Have you been in CHAD ? If yes, when and where ?</i>		

Ma signature engage ma responsabilité et m'expose, en sus des poursuites prévues par la loi en cas de fausse déclaration, à me voir refuser tout visa d'entrée au TCHAD à l'avenir.
In signing this form, I commit myself to disclose only true information. I understand that any false statment exposes me, in addition to legal probe under Chadian laws, to being refused any Chadian visa in the future.

Place _____ Date _____

Signature :

2401 Massachusetts Ave, NW, Washington, DC 20008 . Tel:(202)652 1312 . Fax:(202)7580431
www.chadembassy.us



C:\nsign\tr\3000\un\Desktop\Visa\%20Application%20Form_Chad_distribued%201



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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!