



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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MOZAMBIQUE WORK/RESIDENCE VISA *U.S. PASSPORT HOLDER*

DOCUMENTS REQUIRED:

VALID PASSPORT:	<u>1</u>	APPLICATION (S):	<u>1</u>
PASSPORT TYPE PHOTO (S):	<u>2</u>	TRAVEL ITINERARY:	<u>1-COPY</u>
WORK CONTRACT:	<u>1-COPY</u>	COMPANY LETTER:	<u>1</u>
POLICE CLEARANCE LETTER:	<u>1-COPY</u>	LTR FROM MINISTRY OF LABOR:	<u>1-COPY</u>

OTHER: SEE NEXT PAGES FOR MORE DETAILED INFORMATION.

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

FEEES PER PERSON:

VIP SERVICE FEE: (REGULAR PROCESS)	<u>\$95.00</u>
CONSULATE FEE: (SEE NEXT PAGE)	<u> </u>
MONEY ORDER:	<u>\$6.00</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

**VISA PROCESSING TIME

REGULAR PROCESSING TIME: 10 TO 15 DAYS

COMMENTS: THE EMBASSY IS CLOSED EVERY FRIDAY. THE EMBASSY RECOMMENDS THAT YOU DO NOT BUY NON-REFUNDABLE OR NON-CHANGEABLE AIRLINE TICKETS UNTIL THE VISA HAS BEEN AND THE PASSPORT IS IN HAND.

REVISED: 10-19-2016 (IM-SDL)

Specializing in Visas, Passports, Document Legalization and Translations



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MOZAMBIQUE WORK/RESIDENCE VISA

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

RESIDENCE/WORK VISA:

1.) U.S. PASSPORT

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

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

3.) ONE (1) COMPLETED APPLICATION

4.) COMPANY LETTER OF GUARANTEE FROM THE USA
COMPANY- *IF AVAILABLE*

5.) WORK CONTRACT FROM THE COMPANY IN MOZAMBIQUE (COPY)

6.) LETTER FROM THE MINISTRY OF LABOR IN MOZAMBIQUE (COPY)

7.) COPY OF POLICE CLEARANCE LETTER - THE TRAVELER
WILL NEED TO CARRY THE ORIGINAL WITH THEM TO
SUBMIT TO THE IMMIGRATION OFFICE WHEN
REQUESTING THE WORK/RESIDENT PERMIT IN
MOZAMBIQUE

8.) COPY OF THE TRAVEL ITINERARY

9.) CONSULATE FEE:

\$160.00 SINGLE ENTRY (10 TO 15 DAY PROCESS)

VALIDITY: WHEN REQUESTING A RESIDENCE/WORK VISA THE CONSULATE
WILL ISSUE A SINGLE ENTRY VISA. ONCE THE VISA HAS BEEN
ISSUED THE APPLICANT WILL NEED TO ARRIVE IN COUNTRY
WITHIN (60) SIXTY DAYS. THE APPLICANT WILL HAVE 30 DAYS
FROM THE DAY THEY ARRIVE IN MOZAMBIQUE TO APPROACH
THE IMMIGRATION OFFICE AND REQUEST THE RESIDENCE
PERMIT (D.I.R.E.) TO BE ISSUED.

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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 (LIST THE TYPE OF 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!

PEDIDO DE ENTRADA EM MOCAMBIQUE REQUEST FOR ENTRY VISA TO MOZAMBIQUE			RECIBO Nº		
PREENCHER COM LETRA LEGIVEL TO BE FILLED IN LEGIBLE LETTERS		RESERVADO AOS SERVICOS: FOR OFFICIAL USE:		VISTO Nº	
UMA ENTRADA Single entry <input type="checkbox"/>				DATA DE EMISSAO/...../.....	
DUPLAS ENTRADAS Double entry <input type="checkbox"/>				VALIDADE/...../.....	
MULTIPLAS ENTRADAS Multiple entries <input type="checkbox"/>					
APELIDO Surname			NOME COMPLETO Full name		
NOME DE SOLTEIRA Maiden name			PAIS E LOCAL DE NASCIMENTO Country and place of birth		
DATA DE NASCIMENTO Date of birth		SEXO Sex	ESTADO CIVIL Marital status		NACIONALIDADE Nationality
PASSAPORTE Nº Passport Nº	DATA DE EMISSAO Date of issue/...../.....	Validade Validity/...../.....	NACIONALIDADE DO P.te P.te nationality		
PROFISSAO/OCUPACAO Profession/Occupation			CARGO QUE OCUPA Position you hold		
INSTITUICAO, ORGANIZACAO OU EMPRESA ONDE TRABALHA Institution, organization or firm you work					
ENDERECO DA RESIDENCIA PERMANENTE Address of the permanent residence					
ESTEVE ALGUMA VEZ EM MOCAMBIQUE ? Have you ever before been in Mozambique ?		SIM Yes	<input type="checkbox"/>	NAO No	<input type="checkbox"/>
JA FOI RESIDENTE EM MOCAMBIQUE ? Have you ever been a resident in Mozambique ?		SIM Yes	<input type="checkbox"/>	NAO No	<input type="checkbox"/>
PORQUE SAIU DE MOCAMBIQUE ? Why did you leave Mozambique ?	DATA DE SAIDA Date of exit	}/...../.....			
INDIQUE AS INSTUICOES E EMPRESAS A QUE ESTEVE LIGADO Mention the institutions and firms to which you were attached					
O PREENCHIMENTO INCORRECTO OU INCOMPLETO IMPLICA RESPOSTA TARDIA, DEVOLUCAO OU INDEFERIMENTO INCOMPLETE OR INCORRECT FILLING IN OF THIS FORM MAY RESULT IN DELAY DEVOLUTION OR REJECTION					

DETALHE OS MOTIVOS DA ENTRADA EM MOCAMBIQUE <u>In detail</u> give reasons for your entry in Mozambique				
TEMPO DE ESTADA EM MOCAMBIQUE Length of stay in Mozambique		DATA DE ENTRADA Date of entry/...../.....	DATA DE SAIDA Date of exit/...../.....	
FRONTEIRA DE ENTRADA Entry border		FRONTEIRA DE SAIDA Exit border		
ENDERECO DA HOSPEDAGEM EM MOCAMBIQUE – Address of residence in Mozambique				
PROVINCIA Province	DISTRITO District	CIDADE City	AVENIDA/RUA Avenue/street	CASA Nº House Nº
FAMILIARES/AMIGOS RESIDENTES EM MOCAMBIQUE – Relatives, friends living in Mozambique				
NOME COMPLETO Full name	NACIONALIDADE Nationality	PARENTESCO Relationship	ENDERECO Address	
RESERVADO AOS SELOS Reserved for stamps				
DATA Date }/...../.....				
ASSUNATURA DO REQUENTE OU DA ENTIDADE SOLICITANTE Signature of applicant or of the applying entity				
ASSINATURA RECONHECIDA POR SEMELHANCA A EXISTENTE NO Nº EMITIDO A/...../..... EM				
RESERVADO AOS SERVICOS For official use			DATA DE RECEPCAO/...../.....	
			DATA DE ENTREGA/...../.....	
..... ASSINATURA DO FUNCIONARIO				