



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#: _____

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

CREDIT CARD INFORMATION:

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

SIGNATURE OF CARD HOLDER
REQUIRED: _____

VISA PROCESSING
LIST COUNTRIES

AND
AND

CONSULATE FEES:
CONSULATE FEES:

_____	-	\$ _____
_____	-	\$ _____
_____	-	\$ _____
_____	-	\$ _____
_____	-	\$ _____

TRAVELERS NAME: _____

DATE OF USA DEPARTURE: _____

DATE YOU NEED PASSPORT: _____

SPECIAL INSTRUCTIONS: _____



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VISA INSTRUCTION SHEET

APPLICATION (S) REQUESTED FOR: PAPUA NEW GUINEA TOURIST VISA

DOCUMENTS REQUIRED:

VALID PASSPORT:	<u>1</u>	APPLICATION (S):	<u>1</u>
PASSPORT TYPE PHOTO (S):	<u>1</u>	ITINERARY/TICKET:	<u>1-COPY</u>
COMPANY LETTER:	<u>N/A</u>	BANK STATEMENT:	<u>1-COPY</u>
ANNUAL REPORT:	<u>N/A</u>	RELEASE LETTER:	<u>N/A</u>
OTHER:	<u>SEE NEXT PAGE FOR MORE DETAILED INSTRUCTIONS.</u>		

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

FEES PER PERSON:

VIP SERVICE FEE:	<u>\$75.00</u>
CONSULATE FEE:	<u>\$25.00</u>
MONEY ORDER FEE:	<u>\$3.00</u>
OTHER FEES:	_____
*ADD RETURN FEDERAL EXPRESS FEE:	_____
TOTAL: (NO PERSONAL CHECKS PLEASE)	<u>_____</u>

*FEDERAL EXPRESS FEES:

PRIORITY LETTER	\$29.00	AVERAGE PROCESSING TIME	<u>7-10 DAYS</u>
2-DAY LETTER	\$23.50		
3-DAY LETTER	\$19.50	PREPARED BY:	_____
SATURDAY LETTER	\$41.50	TODAY'S DATE:	_____

COMMENTS: _____

REVISED: 01-01-2012 (KS)

Specializing in Visas, Passports, Document Legalization and Translations



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PAPUA NEW GUINEA

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

TOURIST VISA:

- 1.) U.S. PASSPORT (MINIMUM OF 6 MONTHS VALIDITY)
- 2.) (1) ONE PASSPORT-TYPE PHOTOGRAPH (2x2)
- 3.) (1) ONE COMPLETED APPLICATION
(APPLICATION CAN BE COPIED)
- 4.) A COPY OF YOUR ROUND TRIP AIRLINE TICKETS
- 5.) A COPY OF YOUR MOST CURRENT BANK STATEMENT
- 6.) CONSULATE FEE:
\$25.00 - (SINGLE ENTRY)

BUSINESS VISA:

- 1.) U.S. PASSPORT (MINIMUM OF 6 MONTHS VALIDITY)
- 2.) (1) ONE PASSPORT-TYPE PHOTOGRAPH (2x2)
- 3.) (1) ONE COMPLETED APPLICATION
(APPLICATION CAN BE COPIED)
- 4.) A COMPANY LETTER OF GUARANTEE
- 5.) A COPY OF YOUR TRAVEL ITINERARY AND OR ROUNDTRIP
AIRLINE TICKETS
- 6.) AN ANNUAL REPORT OF PARENT COMPANY
- 7.) BRIEF REPORT ON PNG-BASED COMPANY OR ON GOING
BUSINESS IN PNG
- 8.) A BRIEF RESUME' DETAILING PAST EMPLOYMENT
- 9.) A COPY OF THE INVITATION
- 10.) CONSULATE FEE:
\$256.25 - (MULTIPLE ENTRY)

VALIDITY: SINGLE ENTRY VISAS ARE TO BE USED WITHIN (6) SIX MONTHS FROM ISSUE DATE. YOU MAY STAY UP TO (60) SIXTY DAYS. MULTIPLE ENTRY VISAS ARE TO BE USED WITHIN (12) TWELVE MONTHS OF ISSUE DATE.

REVISED: 7-24-2009 (EL)



Department of Foreign Affairs
and Trade

APPLICATION FOR ENTRY PERMIT

INSTRUCTIONS

1. Please read the notes on the rear of this form before completing the form.
2. A separate form is required for each person seeking entry to PNG who is travelling on their own passport. Where the application is in respect of a child under 16 years of age, both parents must sign the application.
3. Please write legibly or use a typewriter and answer all questions as fully as possible.
4. The completed form and the applicant's passport should be sent to one of the addresses on the reverse of this form.

OFFICE USE ONLY

Date Received: / / By: _____
 File No: _____ Group: _____
 Receipt: _____ ICD Clear: / /
 EPIS Registered on: / /
 Decision: _____ / /
 Applicant Notified on: / /

TICK THE PURPOSE AND CIRCLE A DESCRIPTION OF YOUR VISIT TO PNG:

- | | | |
|--|---|---|
| <input type="checkbox"/> Visitor
Tourist - Tour Package Journalist
Tourist - Own Itinerary Yachtsperson
Visiting Relative | <input type="checkbox"/> Working Resident
Businessperson/Investor
Employment
Working Dependant | <input type="checkbox"/> Short-term Employment
Consultant/Specialist
Dependant of Citizen |
| <input type="checkbox"/> Business
Short-term Multiple Entry | <input type="checkbox"/> Student
Formal Education | <input type="checkbox"/> Occupational Trainee |
| <input type="checkbox"/> Entertainer
Commerical:
Film-maker Comedian Musician
Charity:
Gospel Group Cultural Exchange | <input type="checkbox"/> Special Exemption
Foreign Official
Aid Worker/Volunteer
Film-maker (Non-commercial)
Emergency Relief Worker
Medical | <input type="checkbox"/> Melanesian Spearhead
Diplomat
Researcher/Academic
Religious Worker
Sportsperson
Domestic Worker |
| <input type="checkbox"/> Accompanying another applicant as a dependant on my own passport | | |

HOW LONG DO YOU WISH TO STAY IN PNG: Days: or Months: or Years:

PERSONAL DETAILS:

Family Name <input type="text"/>		Given Names <input type="text"/>	
Date of Birth <input type="text"/> Day Month Year	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status <input type="checkbox"/> Never Married <input type="checkbox"/> Married <input type="checkbox"/> De facto <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	
Country of Birth <input type="text"/>	Nationality <input type="text"/>		
Passport Number <input type="text"/>	Expiry Date <input type="text"/> Day Month Year	Occupation <input type="text"/>	
Passport Issue Date <input type="text"/> Day Month Year	Passport Issuing Place <input type="text"/>	Passport Issuing Authority <input type="text"/>	

TRAVEL ARRANGEMENTS:

Name of Vessel/Flight <input type="text"/>	Departure to PNG Port: <input type="text"/> Date: <input type="text"/> Day Month Year	Arrival in PNG Port: <input type="text"/> Date: <input type="text"/> Day Month Year
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For entry for the purposes of employment:

Please attach copies of the following documents:

- A letter of offer of employment from your PNG sponsor.
- The letter of approval of your work permit, including the work permit number, position number and expiry date.
- A certificate of good health from a registered doctor, a recent chest X-ray, and the results of a recent HIV test.
- A statement of your good character from your local police authorities.

For all other types of entry:

How will you be funding your stay in PNG?

- Salary
- Company sponsor
- Own funds
- Family

If you have ever changed your name, are known by an alias, or own another passport, please provide details:

PREVIOUS NAME/ALIAS DETAILS:

Family Name Given Names Date of Birth Sex Marital Status

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OTHER PASSPORTS:

Country of Issue Passport Number Passport Expiry Date

--	--	--

ORGANISATIONAL SPONSOR:

Organisation Name

Agent

Contact Address Number and Street

Suburb/Town

State/Province

Postcode

Country

Business Telephone

Facsimile

Have you visited PNG before: Yes No

If yes, please give details of your last visit

Date Purpose of visit Duration of visit Address during stay

Day Month Year

Have you been convicted of a criminal offence: Yes No

If yes, please give details of the date, nature of offence, place of conviction and the penalty imposed.

Have you been deported from, or refused entry to Papua New Guinea, or any other country: Yes No

If yes, please give details.

Have you been a patient in a mental home/institution, or do you suffer from a disease which may constitute a health risk to Papua New Guinea: Yes No

If yes, please give details.

ADDRESSES:

RESIDENTIAL:

Number and Street

Suburb/Town

State/Province

Postcode

Country

Home Telephone

Business Telephone

PNG:

Number and Street

Town/Village

Province

Postal Address

Home Telephone

Business Telephone

EMERGENCY CONTACT:

Family name

Given Names

Relationship to Applicant

Contact Address Number and Street

Suburb/Town

State/Province

Postcode

Country

Home Telephone

Business Telephone

DECLARATION:

By signing this form, I,..... declare that the information provided on the form is true and correct, and that I have disclosed all information that may be relevant to determining whether I should be granted an entry permit to travel to and stay in Papua New Guinea.

PHOTOGRAPH

Signature of Applicant/Parents/Guardian

Date: / /