

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: vipinfo@vippassports.com



WORK ORDER REQUEST FORM

TRAVELER INFO

TRAVELER NAME

TRAVELER DATE OF BIRTH

DATE OF U.S. DEPARTURE

DATE PASSPORT IS NEEDED

VIP FILE LOCATOR NUMBER

DON'T FORGET
TO FAX OR EMAIL
YOUR DOCUMENTS TO
OUR OFFICE FOR OUR
COMPLIMENTARY
PASSPORT/VISA
PRE-CHECK!

BILLING INFORMATION (CHECK BOX IF SAME AS SHIPPING)

CONTACT & COMPANY NAME

ADDRESS (STREET, CITY, STATE, ZIP)

PHONE NUMBER

CELL NUMBER

FAX NUMBER

EMAIL

P.O. OR BILLING REF#:

RETURN SHIPPING INFORMATION (CHECK BOX TO WAIVE SIGNATURE)

CONTACT & COMPANY NAME

ADDRESS (STREET, CITY, STATE, ZIP)

PHONE NUMBER

CELL NUMBER

FAX NUMBER

EMAIL

METHOD OF PAYMENT

CREDIT CARD

CARD NUMBER

EXP. DATE

CVV CODE

SIGNATURE OF CARD HOLDER

AUTH. AMOUNT \$_____

MONEY ORDER

CASHIER'S CHECK

COMPANY CHECK

SPECIAL INSTRUCTIONS: _____

SPECIALIZING IN VISAS, PASSPORTS, DOCUMENT TRANSLATIONS & LEGALIZATIONS

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SIERRA LEONE TOURIST VISA

U.S. PASSPORT HOLDER

DOCUMENTS REQUIRED

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

VALID PASSPORT:	1	APPLICATION (S):	1
PASSPORT TYPE PHOTO (S):	1-COLOR	TRAVEL ITINERARY:	1-COPY
HOTEL CONFIRMATION:	N/A	INT'L HEALTH CERTIFICATE:	1-COPY
BANK STATEMENT:	N/A	COPY OF INVITATION:	N/A

OTHER: SEE NEXT PAGES FOR MORE DETAILED INSTRUCTIONS.

PROCESSING FEES

(PER APPLICANT)

VIP SERVICE FEE: (REGULAR PROCESS) \$95.00

CONSULATE FEE: (SEE NEXT PAGE) _____

MONEY ORDER: \$6.00

SPECIAL HANDLING FEE: (LESS THAN 4 DAY RUSH PROCESS) _____

OTHER FEES: _____

RETURN SHIPPING FEE: _____

TOTAL: (NO PERSONAL CHECKS PLEASE) _____

RETURN SHIPPING FEES (SELECT ONE)	
<input type="checkbox"/> PRIORITY OVERNIGHT	\$35.00
<input type="checkbox"/> 2-DAY LETTER	\$27.50
<input type="checkbox"/> 3-DAY LETTER	\$22.50
<input type="checkbox"/> SATURDAY LETTER	\$49.00
<input type="checkbox"/> 1 ST OVERNIGHT LETTER	\$85.00

REGULAR PROCESS 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 THAT WE SUBMIT YOUR APPLICATION (\$50.00 SPECIAL HANDLING).	

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: 10-04-2018 (SDL)

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SIERRA LEONE

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

TOURIST VISA:

- 1.) U.S. PASSPORT (MINIMUM OF 1 YEAR REMAINING VALIDITY WITH AT LEAST 1 BLANK VISA PAGE)
- 2.) (1) ONE PASSPORT-TYPE PHOTOGRAPH (2x2)
- 3.) (1) ONE COMPLETED APPLICATION (IF APPLICANT IS A MINOR PLEASE CALL OUR OFFICE FOR FURTHER DETAILED INFORMATION)
- 4.) COPY OF THE TRAVEL ITINERARY
- 5.) A CLEAR COPY OF THE INTERNATIONAL HEALTH CERTIFICATE SHOWING A CURRENT YELLOW FEVER IMMUNIZATION
- 6.) CONSULATE FEE:
 \$160.00 - MULTIPLE ENTRY (REGULAR PROCESS)
 \$210.00 - MULTIPLE ENTRY (RUSH PROCESS)

BUSINESS VISA:

- 1.) U.S. PASSPORT (MINIMUM OF 1 YEAR REMAINING VALIDITY AND HAVE AT LEAST 1 BLANK VISA PAGE)
- 2.) (1) ONE PASSPORT-TYPE PHOTOGRAPH (2x2)
- 3.) (1) ONE COMPLETED APPLICATION
- 4.) COPY OF THE TRAVEL ITINERARY
- 5.) COMPANY LETTER OF GUARANTEE
- 6.) A CLEAR COPY OF THE INTERNATIONAL HEALTH CERTIFICATE SHOWING A CURRENT YELLOW FEVER IMMUNIZATION
- 7.) COPY OF THE INVITATION FROM YOUR SPONSOR IN SIERRA LEONE
- 8.) CONSULATE FEE:
 \$160.00 - MULTIPLE ENTRY (REGULAR PROCESS)
 \$210.00 - MULTIPLE ENTRY (RUSH PROCESS)

VALIDITY: THE VALIDITY, DURATION OF STAY, AND NUMBER OF ENTRIES OF THE VISA IS ISSUED AT THE DISCRETION OF THE CONSULAR OFFICERS, BUT ARE NORMALLY ISSUED AND VALID FOR ONE (1) YEAR WITH MULTIPLE ENTRIES.

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VISA APPLICATION FORM

VISA APPLICATION FOR OTHER NATIONALS (SIX MONTHS ONE YEAR)

THREE YEARS VISA FOR AMERICAN PASSPORTS ONLY

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

SEX: _____ MARITAL STATUS: _____ PHONE NO. _____

HOME ADDRESS: STREET: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL ADDRESS (Required) _____

Date of Birth [DATE: ____/____/____] [MONTH IN WORDS: _____] [YEAR: _____]

Place of Birth: TOWN _____ COUNTRY _____

PARTICULARS OF PASSPORT

Passport Number: _____ Date of Issue: ____/____/____ Date of Expiration: ____/____/____

Country of Issue: _____ Passport Type: _____

Nationality: _____

PURPOSE OF VISIT: _____

PROPOSED DATE OF ARRIVAL: ____/____/____ DURATION OF STAY: _____

NAME OF REFERREE IN SIERRA LEONE: _____ PHONE NO. _____

PROPOSED ADDRESS: _____

Applicant Signature: _____ Date: _____

REQUIREMENTS:

1. One Passport Size Photo
2. Copy of Birth Certificate for Minors (0 -16years)
3. Sign and Notarize Application form for Minors (0 – 16 years)
4. Fee of \$160.00 (Additional \$50.00 for expedited process) MONEY ORDER ONLY
5. Prepaid Self-addressed Envelope (Priority/Next Day Delivery)

FOR OFFICIAL USE ONLY

Approving Officer: _____ Signature: _____ Date: ____/____/____

Fee: _____ VISA No. _____ General Receipt No. _____