



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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TOGO 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>
COMPANY LETTER:	<u>1</u>	DRIVERS LICENSE:	<u>N/A</u>
INT'L HEALTH CERTIFICATE:	<u>1</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>\$140.00</u>
MONEY ORDER FEE:	<u>\$6.00</u>
OTHER FEES: _____	_____
*ADD RETURN FEDERAL EXPRESS FEE:	_____
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
FIRST OVERNIGHT DELIVERY:	\$75.00

PROCESSING TIMES:

AVERAGE PROCESSING TIME 10 - 12 DAYS

COMMENTS: _____

REVISED: 10-30-2017 JENN

Specializing in Visas, Passports, Document Legalization and Translations



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TOGO VISA ***U.S. PASSPORT HOLDER***

DOCUMENTS REQUIRED:

- 1.) **U.S. PASSPORT** –
 - ❖ SIGNED BY APPLICANT
 - ❖ MINIMUM OF 6 MONTHS REMAINING VALIDITY
 - ❖ TWO 2 SIDE BY SIDE BLANK VISA PAGES)
- 2.) **TWO (2) PASSPORT-TYPE PHOTOGRAPHS** (2x2")
- 3.) **TWO (2) COMPLETED APPLICATION FORMS**
- 4.) **COMPANY LETTER OF GUARANTEE** (*BUSINESS REQUESTS ONLY*)
- 5.) **COPY OF THE TRAVEL ITINERARY**
- 6.) **INTERNATIONAL HEALTH CERTIFICATE** SHOWING A CURRENT YELLOW FEVER IMMUNIZATION
- 7.) **CONSULATE FEE: \$140.00**

VALIDITY: A TOURIST OR BUSINESS VISA IS USUALLY VALID FOR MULTIPLE ENTRIES FOR THREE (3) MONTHS FROM THE DATE THE VISA IS ISSUED. IF TRAVELER WISHES TO EXTEND VISA VALIDITY, THEY MAY CONTACT THE MINISTRY OF INTERIOR IN TOGO BEFORE THE VISA EXPIRES.

TOURIST VISAS: IF APPLICANT IS UNDER 18 YEARS OF AGE, THE PARENTAL PERMISSION (*AUTHORISATION PARENTALE*) FORM MUST BE COMPLETED BY BOTH PARENTS. NO APPLICATION FOR A CHILD WILL BE COMPLETED WITHOUT THIS FORM. [CLICK HERE](#) TO COMPLETE THAT FORM.

REVISED: 10-31-2017 JENN



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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.

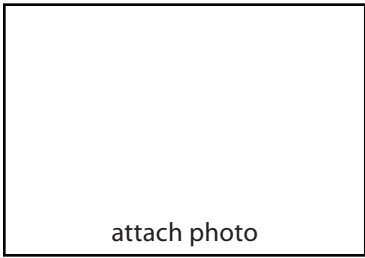
WE WOULD BE VERY APPRECIATIVE IF YOU WOULD ISSUE MR. / MRS.
(TRAVELER) THE APPROPRIATE **(SINGLE OR MULTIPLE)** ENTRY BUSINESS VISA
AT YOUR EARLIEST CONVENIENCE.

THANK YOU,

(SUPERVISORS SIGNATURE)

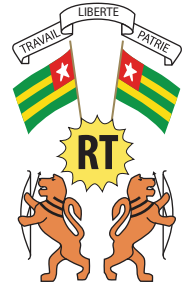
PLEASE BE SURE THAT THE PERSON WHO AUTHORIZED YOUR TRIP SIGNS THIS
LETTER. THE TRAVELER SHOULD NOT SIGN THIS LETTER.

DO NOT ATTENTION THIS LETTER TO VIP SERVICES!



EMBASSY OF THE REPUBLIC OF TOGO

2208 Massachusetts Avenue, NW,
Washington DC 2008
Phone: 202-234-4212
Fax: 202-232-3190



For Official Use:

Visa #:
Type of Visa:
Date of Issue:
Charges:
Signature of Issuing officer:

APPLICATION FOR REPUBLIC OF TOGO ENTRY PERMIT / VISA

1.(a) Applicant Surname: _____ Applicant First names: _____

Previous names (if applicable): _____

b. Date of Birth: _____ c. Place of Birth: _____

d. Nationality / Current Citizenship: _____ e. Former Nationality (if any) _____

f. Other citizenships held/ previous citizenships: _____

g. Passport date of issue: _____ h. Passport Place of issue: _____

i. Passport Number: _____ j. Passport date of expiration: _____

2. Current Profession or Occupation: _____

3(a). Business address / phone / fax / e mail: _____

3(b). Residential address / phone / fax / e mail: _____

4. Proposed date of Departure: _____ 5. Traveling by: Air Sea Land

Is applicant in possession of a return ticket? Ticket issuer & number:

6. Purpose of journey: Business Tourism Employment Official

7. Names and addresses of two references:

(i) _____

(ii) _____

8. If for employment, name and address of employer: _____

9. Duration of stay: _____ 10. Date of last visit: _____

11. Applicant signature: _____ Date: _____