

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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ALGERIA BUSINESS VISA

NON-U.S. PASSPORT HOLDER

PLEASE SUBMIT THE FOLLOWING REQUIREMENTS

- 1.) PASSPORT (MINIMUM OF 6 MONTHS VALIDITY)
- 2.) TWO (2) PASSPORT-TYPE PHOTOGRAPHS (2x2)
- 3.) TWO (2) COMPLETED APPLICATIONS (TYPED)
ALL APPLICATION FORMS MUST BE FULLY COMPLETED WITH NO FIELDS LEFT BLANK (APPLICATIONS RECEIVED WITH MISSING INFORMATION SHOULD EXPECT DELAYS)
- 4.) COPY OF TRAVEL ITINERARY
- 5.) ONE (1) COMPANY LETTER OF GUARANTEE – **MUST INCLUDE THE PASSPORT DETAILS OF THE APPLICANT** (PASSPORT NUMBER, DATES OF ISSUE AND EXPIRATION, PLACE OF ISSUE)
- 6.) ONE (1) LETTER OF INVITATION
- 7.) PROOF OF INSURANCE (EUROPEAN UNION NATIONALITIES) - PLEASE PROVIDE A LETTER STATING APPLICANT IS COVERED INTERNATIONALLY BY THEIR INSURANCE PROVIDER WHILE IN ALGERIA, ONLY IF APPLICANT IS PART OF THE EUROPEAN UNION.

COUNTRIES OF THE EUROPEAN UNION NEED PROOF OF INSURANCE				
AUSTRIA	ESTONIA	IRELAND	NETHERLANDS	SPAIN
BELGIUM	FINLAND	ITALY	POLAND	SWEDEN
BULGARIA	FRANCE	LATVIA	PORTUGAL	
CYPRUS	GERMANY	LITHUANIA	ROMANIA	
CZECH REP.	GREECE	LUXEMBOURG	SLOVAKIA	
DENMARK	HUNGARY	MALTA	SLOVENIA	

- 8.) PROOF OF U.S. STATUS: (PLEASE SUBMIT ONE OF THE FOLLOWING)
 - COPY OF PERMANENT RESIDENT CARD
 - ORIGINAL U.S. VISA AND PRINTED I-94 (VISIT <https://i94.cbp.dhs.gov>)
- 9.) CONSULATE FEE: \$160.00 – SUBJECT TO CHANGE BASED ON NATIONALITY

CONTINUED →

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PLEASE NOTE: IF YOU HAVE BEEN INVITED FROM A COMPANY IN "HASSI MESSAOUD" AND/OR ARE TRAVELING TO "HASSI MESSAOUD", THE APPLICATION MUST HAVE DETAILED INFORMATION WHERE IT ASK FOR PURPOSE OF TRAVEL. THE EMBASSY WILL REJECT THE APPLICATION IF YOU ONLY LIST "BUSINESS" OR "VISIT" WITHOUT FURTHER DETAILED INFORMATION REGARDING THE PURPOSE OF THE TRIP. BE SURE TO LIST EXACTLY WHY YOU ARE TRAVELING TO ALGERIA WHEN ASKED ON THE APPLICATION. THE CONSULATE WILL NOT ISSUE YOU A VISA IF YOU HAVE AN ISRAELI STAMP IN YOUR PASSPORT. **IT IS RECOMMENDED THAT YOU DO NOT BUY THE AIRLINE TICKET UNTIL AFTER THE VISA HAS BEEN ISSUED AND THE PASSPORT IS IN HAND.**

VALIDITY: THE EMBASSY WILL NORMALLY ISSUE THE VISA ACCORDING TO THE DATES LISTED ON THE APPLICATION. BE SURE TO BE AS SPECIFIC AS POSSIBLE WHEN COMPLETING THE SECTION REGARDING THE DATES OF YOUR TRAVEL. PLEASE LIST THE EARLIEST POSSIBLE DATE YOU COULD TRAVEL AS THIS WILL BE THE START DATE OF THE VISA. **ONCE THE VISA HAS BEEN ISSUED THIS DATE CANNOT BE CHANGED.** THE VALIDITY, DURATION OF STAY, AND NUMBER OF ENTRIES OF THE VISA IS ISSUED AT THE DISCRETION OF THE CONSULAR OFFICERS, WHOSE DECISIONS ARE BASED ON THE LAWS AND REGULATIONS OF ALGERIA.

REVISED 11-20-2019 JENN

IMPORTANT: False statements will lead to the application being rejected or to the annulment of a visa already granted.

اللقب Last name	الاسم First name		
الاسم قبل الزواج Maiden name	اسم آخر Middle name		
تاريخ الميلاد Date of birth (DAY/MONTH/YEAR)	المدينة City.....	الولاية State.....	
اسم الأب Father's name.....	Mother's maiden & first name.....		
الوضع العائلي * Marital status (*)	أعزب Single	متزوج Married	مطلق Divorced
الجنسية الحالية Present Citizenship.....	العنصر Personal address.....	رقم هاتف البيت Home phone	ذكر M
E-mail.....	رقم هاتف البيت Home phone	Cell phone	أنثى F
Husband-wife (زوج) اللقب Last name (Maiden name for wife).....			
تاريخ الميلاد Date of birth (DAY/MONTH/YEAR)		المدينة City.....	الولاية State
Children الأطفال to be filled when they travel with you لا يملأ الا في حالة سفر الأولاد الاسم واللقب تاريخ الميلاد مكان الميلاد الجنسية Last & First name Date of birth DAY/MONTH/YEAR Place of birth Citizenship			
Type of travel document جواز سفر عادي Ordinary passport رقم رقم Number.....			
طبيعة وثيقة السفر وثيقة أخرى (توضيح) other document (give precision).....			
Issued on..... DAY/MONTH/YEAR		Expire on..... DAY/MONTH/YEAR	
تأشيرة مطلوبة للدخول (*) Visa solicit for (*)			
مرة واحدة 1 entry		عدة مرات several entries	
المهنة Occupation.....			
العنوان المهني Address of employer		رقم هاتف المكتب Office phone	
في حالة عبور In case of transit هل لديكم تأشيرة دخول لهذا البلد (*) Do you have visa for this country (*)			
الوجهة النهائية final destination		نعم Yes	
لا No			
العنوان أثناء الإقامة Address during your stay.....			
عرض الإقامة Purpose			
اسم الشخص المقصود في الجزائر Name of your contact in Algeria.....		رقم الهاتف Phone.....	
مدة الإقامة Length of stay		من From	
إلى To.....			
هل سبق لكم زيارة الجزائر ؟ Have you already visited Algeria?			
كم مرة زرت الجزائر ؟ Number of visits.....		في أي تاريخ ؟ when?	
مدة الإقامة Length of stay			
التزم بمغادرة الإقليم بعد انقضاء أجل التأشيرة التي ستمنح لي و بعدم قبول اي عمل ماجور او غير ماجور خلال إقامتي، و بعدم الإقامة بصفة نهائية I undertake to leave the Algerian territory at the expiration of the visa which would be granted to me, and to refuse any employment being paid or not, during my stay, and to not establish me there هام : تملأه جميع الخانات بحروف واضحة، في حالة خطأ أو عدم ملئ بعض الخانات لن يرد على طلبكم IMPORTANT: All categories must be completed in CAPITAL LETTERS in case mistakes or omissions; your application will be rejected (*) Put an X in the category corresponding to your answer التاريخ، و إمضاء المعني { صاحب الطلب } DATE AND APPLICANT SIGNATURE			

الرجاء الصاق الصورة هنا Please you must attach photo here
خاص بالإدارة For office use only
رقم الطلب Application Number
تاريخ الإيداع Received on
عدد مرات الدخول المرخصة Nbr. of authorized entries
مدة الإقامة Duration of stay
الضريبة المستحقة Tax
تاريخ صدور التأشيرة Issued on
التاريخ المحدد للاستعمال Date limit of utilization
رئيس المركز (الامضاء و الختم) Chief of post (Signature and stamp)

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EXAMPLE OF A COMPANY LETTER OF GUARANTEE

DO NOT ATTENTION THIS LETTER TO VIP SERVICES!

DATE: _____

EMBASSY/CONSULATE OF ALGERIA

TO WHOM IT MAY CONCERN:

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)**.

PASSPORT NUMBER:

PASSPORT PLACE OF ISSUE:

PASSPORT DATE OF ISSUE:

PASSPORT DATE OF EXPIRATION:

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.

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