VIP PASSPORT SERVICES, INC.

2012 Louisiana Street
Houston, Texas 77002
713-659-8472
Website: www.vippassports.com Email: info@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 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	
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	
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, Apostilles, Document Legalizations, and Translations

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NAMIBIA BUSINESS VISA

U.S. PASSPORT HOLDER

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

PROCESSING FEES

(PER APPLICANT)

VIP SERVICE FEE: (REGULAR PROCESS)	$150.00
CONSULATE FEE: **(SEE NEXT PAGE)**	
MONEY ORDER:	$6.00
OTHER FEES: _____	
ADD RETURN SHIPPING FEE: (**SEE * BELOW**)	
TOTAL: ***(NO PERSONAL CHECKS PLEASE)***	

FEDEX LETTER RETURN SHIPPING FEES *(SELECT ONE)*	
☐ PRIORITY OVERNIGHT	$65.00
☐ 2-DAY	$57.50
☐ 3-DAY	$47.50
☐ SATURDAY	$95.00
☐ 1ST OVERNIGHT - CALL	
☐ LOCAL DELIVERY- CALL	

REGULAR PROCESS TIME:	3 TO 5 DAYS
THE PROCESSING TIME STARTS WHEN THE EMBASSY/CONSULATE RECEIVES THE REQUEST.	

*FEDEX WILL CHARGE ADDITIONAL FEES FOR ALL RESIDENTIAL DELIVERIES. ALL SHIPPING FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE.

COMMENTS: **THERE WILL BE AN ADDITIONAL $125.00 FEDEX (TO/FROM) FEE IF THE CONSULATE IS NOT LOCATED IN HOUSTON, TEXAS.**

REVISED: 9-24-2025 (EL)

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NAMIBIA BUSINESS VISA

PLEASE SUBMIT THE FOLLOWING REQUIRED DOCUMENTS

1.) **VALID SIGNED PASSPORT**
   - MINIMUM OF 6 MONTHS VALIDITY
   - AT LEAST 3 BLANK VISA PAGES

2.) **TWO (2) COMPLETED VISA APPLICATIONS**

3.) **TWO (2) RECENT (TAKEN WITHIN THE LAST 90 DAYS) PASSPORT TYPE PHOTOS** – NO GLASSES, NO EARRINGS

4.) **COPY OF TRAVEL ITINERARY**

5.) **HOTEL CONFIRMATION**

6.) **THE YELLOW FEVER VACCINATION IS REQUIRED IF YOU HAVE TRAVELED TO THESE COUNTRIES (SEE LIST BELOW) PRIOR TO TRAVELING TO NAMIBIA**

7.) **COPY OF THE SIGNED INVITATION LETTER**

8.) **COMPANY LETTER OF GUARANTEE**

9.) **COPY OF MOST RECENT BANK STATEMENT** – FOR THE LAST 6 MONTHS

10.) **CONSULATE FEES**: **$ 90.00** – SINGLE ENTRY – 3 MONTHS VALIDITY
$180.00 – MULTIPLE ENTRY – 3 MONTHS VALIDITY

VALIDITY: THE VALIDITY AND THE LENGTH OF STAY IS DETERMINED BY THE VISA OFFICER ON A CASE BY CASE SITUATION.

NOTE: DO NOT APPLY FOR THE VISA MORE THAN 3 MONTHS IN ADVANCE OF THE PLANNED TRAVEL DATE.

REVISED: 9-24-2025 (EL)

YELLOW FEVER ENDEMIC ZONE

AFRICA	CENTRAL AND SOUTH AMERICA
Angola	Ecuador
Benin	Guiana
Burkina Faso	Panama
Burundi	Paraguay
Cameroon	Peru
Central Africa Republic	Suriname
Chad	Trinidad and Tobago
Congo	Brazil
Côte d'Ivoire	Venezuela
Colombia	Argentina
Democratic Republic of the Congo	Colombia
Equatorial Guinea	Bolivia
Ethiopia	French Guyana
Gabon	Guyana
Gambia	
Ghana	
Guinea	
Guinea-Bissau	
Kenya	
Liberia	
Mali	
Mauritania	
Niger	
Nigeria	
Rwanda	
Senegal	
Sierra Leone	
Sudan	
Togo	
Uganda	

3-1/0033

FOR OFFICIAL USE ONLY
Approved / Not Approved
Single / Multiple entry

File No.: _____

Date of issue: _____

Date of expiry: _____

Remarks: _____

_____

_____

Signature: _____

Date: _____

REPUBLIC OF NAMIBIA

Ministry of Home Affairs and Immigration

Immigration Control Act, 1993

APPLICATION FOR VISA

(Sections 12 and 13 / Regulation 11)

Items 4 to 10 to be completed by inserting an "X" in the appropriate box.

1. Surname: _____
2. First names: _____
3. Maiden name (if applicant is or was a married woman): _____
4. Sex: Male ☐ Female ☐ 5. Marital status: Never Married ☐ Married ☐ Divorced ☐ Widow/Widower ☐
6. Have you at any time applied for a permit to settle permanently in Namibia? Yes ☐ No ☐
7. Have you ever been restricted or refused entry to Namibia? Yes ☐ No ☐
8. Have you ever been deported or ordered to leave Namibia? Yes ☐ No ☐
9. Have you ever been convicted of any crime in any country? Yes ☐ No ☐
10. Are you suffering from tuberculosis, or any other contagious lung disease; trachoma, or any other chronic eye infection, frambesia, yaws, scabies or any other contagious bacterial skin disease; syphilis or any other venereal disease; or leprosy or Acquired Immune Deficiency Syndrome virus (AIDS virus), or any mental illness or affliction? Yes ☐ No ☐
11. If the reply to any one of the questions 6 to 10 is in the affirmative, attach full particulars.
12. Birth (a) Date: _____ (b) Place: _____ Country _____
13. Citizenship: _____ (if acquired by naturalization, state original citizenship)
14. Passport: (a) Number: _____ (b) Place of issue _____
    (c) Date of issue: _____ (d) Date of expiry: _____
    (e) Is passport valid for travel to Namibia: Yes ☐ No ☐
15. (a) Present residential address: _____
    _____ (b) Telephone no.: (_____) _____
16. Address and period of residence in country of which you are a permanent resident:
    (a) Residential address: _____
    (b) Telephone no.: (_____) _____ (c) Period: _____
17. Occupation or Profession: _____
18. Firm, company, university, etc., to which you are attached or which you represent:
    (a) Name and address of employer: _____
    (b) Telephone no.: (_____) _____
    (c) Nature of business: _____
    (d) If a student, name of university to which you are attached and the course pursued: _____
19. If accompanied by your wife and children state:

First Names	Date of Birth	Place of Birth
(a)		
(b)		
(c)		

20. (a) What amount of money will you have available on arrival in Namibia for your own use? N$ _____
    (b) Will you be in possession of an onward/return ticket? Yes ☐ No ☑

(N.B. separate applications have to be completed in respect of your spouse or children over the age of 16 years and children travelling with their own passports.)

NOTE: COMPLETE ONLY PART A OR B

(A) HOLIDAY / BUSINESS / WORK / TRANSIT / VISA

1. Intended date and port of arrival in Namibia: _____
2. (a) What is the purpose of you visit? _____
   (b) if it is for business purposes, explain in detail the nature of business: _____
   _____
   (c) Duration of intended visit (Number of days, weeks or months) _____
3. Places to be visited in Namibia (full address, including telephone number must be provided) _____
   _____
   _____
   _____
4. If the purpose of your visit is for medical treatment, please provide the following information:
   (a) Name of doctor, hospital or clinic you will visit: _____
   (b) Who will pay your medical expenses and hospital fees: _____
   (c) If you are liable for the expenses and fees above, state amount of funds available: _____
5. Proposed residential address in Namibia: _____
   _____ Telephone no.: (_____) _____
6. Names and addresses of relatives in Namibia:

Name	Address and Telephone number	Relationship
(a)	.....	.....
(b)	.....	.....

7. Date of last visit, if any, to Namibia: _____
8. Do you contribute professionally or otherwise to publications, radio, television or films? If so, give details: _____
   _____
9. (a) Destination after leaving Namibia: _____
   (b) Mode of travel to destination: _____
   (c) Intended date and port of departure: _____
   (d) Is your entry to that destination assured, e.g. do you hold a visa or a permit for permanent or temporary residence? (Proof to be submitted)
   _____
10. Reasons for travelling through Namibia: _____
    _____

(B) RETURN VISA

IMPORTANT

An applicant has to:
(i) produce his or her passport or travel document; and
(ii) submit proof of his or her right of residence in Namibia if not endorsed in his or her passport.

1. (a) Kind of Permit and number: _____
   (b) Date of departure: _____
   (c) Expected date of return: _____
2. Particulars of Residence in Namibia:

Date of first entry	Port of entry	Periods of residence in Namibia From	To
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

3. Countries to which you will be travelling:
   (a)_____ (b)_____ (c)_____ (d)_____
4. Purpose of journey (explain fully): _____
   _____

I solemnly declare that the above particulars given by me are true in substance and in fact and that I fully understand the meaning thereof.

Date: _____ Signature: _____

(N.B. Only the signature of the applicant will be accepted)

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EXAMPLE OF A COMPANY LETTER OF GUARANTEE

DO NOT ATTENTION THIS LETTER TO VIP PASSPORT SERVICES, INC!

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.