



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

<input type="checkbox"/> CREDIT CARD	CARD NUMBER	EXP. DATE	CVV CODE
SIGNATURE OF CARD HOLDER		AUTH. AMOUNT \$_____	
<input type="checkbox"/> MONEY ORDER	<input type="checkbox"/> CASHIER'S CHECK	<input type="checkbox"/> COMPANY CHECK	

SPECIAL INSTRUCTIONS: _____



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CAMEROON BUSINESS E-VISA NON 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)	<u>\$150.00</u>
CONSULATE FEE: (SEE NEXT PAGE)	<u> </u>
MONEY ORDER:	<u>\$6.00</u>
OTHER FEES: _____	<u> </u>
TOTAL: (NO PERSONAL CHECKS PLEASE)	<u> </u>

THE COMPLETED EVISA WILL BE EMAILED BACK TO THE REQUESTER UNLESS ALTERNATE EMAIL IS PROVIDED ON WORK ORDER REQUEST FORM. PLEASE BE SURE THE CORRECT EMAIL(S) ARE LISTED TO ENSURE NO DELAYS IN THE RETURN OF THE COMPLETED EVISA.

REGULAR PROCESS TIME: **2 TO 10 DAYS**

COMMENTS: _____

REVISED: 12-01-2023 (EL)



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CAMEROON BUSINESS E-VISA

NON U.S. PASSPORT HOLDER

PLEASE SEND THE REQUIRED DOCUMENTS BELOW TO OUR OFFICE, VIA EITHER EMAIL OR COURIER/SHIPPING. ONCE PROCESSED AND COMPLETED, WE WILL SEND A CONFIRMATION EMAIL CONTAINING THE ELECTRONIC VISA TO THE EMAIL LISTED ON THE WORK ORDER.

1.) COPY OF VALID PASSPORT (MUST HAVE A MINIMUM OF 12 MONTHS REMAINING VALIDITY AND HAVE TWO BLANK VISA PAGES)- **PDF FORMAT**

2.) ONE (1) RECENT PASSPORT-TYPE PHOTOGRAPH (2x2) – IN JPEG FORMAT

- WHITE BACKGROUND, NO SHADOWS
- NECK, CHIN, NOSE, FOREHEAD, BOTH EARS AND EYES MUST BE VISIBLE
- FRONT FACING WITH NATURAL FACIAL EXPRESSION (MOUTH CLOSED, NO SMILING/FROWNING)
- NO GLASSES OR HEAD-COVERING ACCESSORIES

3.) ONE (1) COMPLETED APPLICATION

4.) COPY OF US STATUS

5.) COPY OF COMPANY LETTER OF GUARANTEE – CONFIRMING WARRANTY OF REPATRIATION

6.) COPY OF INVITATION CERTIFIED/LLEGALIZED BY THE LOCAL POLICE

7.) COPY OF CONFIRMED TRAVEL ITINERARY OR AIRLINE TICKETS

8.) COPY OF INTERNATIONAL HEALTH CERTIFICATE SHOWING PROOF OF YELLOW FEVER IMMUNIZATION

9.) COPY BUSINESS CONTRACT BETWEEN TRAVELER AND PARTNER(S) IN CAMEROON UNDERSIGNED BY ADMINISTRATIVE OR IMMIGRATION AUTHORITIES

10.) CONSULATE FEE: **\$181.82** – REGULAR VISA VALID FOR UP TO 6 MONTHS

\$272.73 – RUSH/EXPRESS VISA VALID FOR UP TO 6 MONTHS

\$272.73 – REGULAR VISA VALID FOR UP TO 1 YEAR

\$363.64 – RUSH/EXPRESS VISA VALID FOR UP TO 1 YEAR

VALIDITY: THE VALIDITY TIME OF THE VISA AND THE LENGTH OF STAY IS DETERMINED ON A CASE BY CASE BASIS BY THE ISSUING VISA OFFICER. NOT ALWAYS WILL THE EMBASSY ISSUE A MULTIPLE ENTRY VISA.

SPECIAL NOTES: THE CONSULATE REQUIRES THE CAMEROON PASSPORT BE SUBMITTED WITH THE VISA APPLICATION OR A WRITTEN LETTER ADDRESSED TO THE EMBASSY STATING WHAT HAS HAPPENED TO THE CAMEROON PASSPORT IF IT IS NO LONGER AVAILABLE.

REVISED: 6-22-2023 (EL)

**EMBASSY OF THE REPUBLIC
OF CAMEROON**

Tél. : (202) 265-8790

Fax : (202) 387-3826

Email: cs@cameroonembassyusa.org



**AMBASSADE DE LA REPUBLIQUE
DU CAMEROUN**

2349 Massachusetts Avenue N.W.

Washington, DC 20008

www.cameroonembassyusa.org

VISA APPLICATION / DEMANDE DE VISA

(WRITE IN CAPITAL LETTERS ONLY / ECRIRE EN LETTRES MAJUSCULES SEULEMENT)

1.	<p style="text-align: center;"><u>TRAVELER'S IDENTITY / IDENTITE DU VOYAGEUR</u></p> <p>Surname: _____ Given Name(s): _____ <i>Nom de Famille Prénom(s)</i> Maiden Name (*): _____ Date of Birth: _____ / _____ / _____ <i>Nom de Jeune Fille Date de Naissance Day/Jour Month/Mois Year/Année</i></p> <p>Sex / Sexe: <input type="checkbox"/> Male <input type="checkbox"/> Female</p> <p>Place of Birth: City: _____ State: _____ Country: _____ <i>Lieu de Naissance Ville Etat Pays</i></p> <p>Citizenship: Origin: _____ Current: _____ <i>Nationalité Origine Actuelle</i></p> <p>Date of Naturalization (*): _____ / _____ / _____ (*) If Applicable <i>Date de Naturalisation Day/Jour Month/Mois Year/Année Si cela s'applique</i></p>	<p>Photograph (Staple or glue the photo)</p> <p>2 inches X 2 inches</p> <p><i>Photographie</i> (Agrafer ou coller la photo)</p>
2.	<p>Parents' Names : Father: _____ Mother: _____ <i>Noms des Parents Père Mère</i></p> <p>Marital Status: <input type="checkbox"/> Single/Célibataire <input type="checkbox"/> Married^(a)/Marié(e) <input type="checkbox"/> Divorced/Divorcé(e) <input type="checkbox"/> Widow(er)/Veuf(ve) <i>Situation Matrimoniale <input type="checkbox"/> Unmarried but Living with a Partner^(a)/Pas Marié(e) mais Vivant en Couple</i></p> <p>^(a) Spouse's or partner's name, sex and phone number: <i>Nom, sexe et numéro de téléphone de l'époux(se) ou du(de la) partenaire</i> _____</p> <p>Children: Number: _____ Age Range: <input type="checkbox"/> 0-5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-15 <input type="checkbox"/> Over 15 / Plus de 15 <i>Enfants Nombre Tranche d'Age</i></p>	
3.	<p style="text-align: center;"><u>TRAVELER'S PASSPORT / PASSEPORT DU VOYAGEUR</u></p> <p>Passport N°: _____ Passport Type: _____ Issuing Country / Authority: _____ <i>N° de Passeport Type de Passeport Pays/ Autorité Emettrice</i></p> <p>Date of Issue: _____ Date of Expiration: _____ Place of Issue: _____ <i>Date de Délivrance Date d'Expiration Lieu de Délivrance</i></p>	
4.	<p>Profession: _____ Employer: _____ Military Status: _____ <i>Profession Employeur Situation Militaire</i></p>	
5.	<p>Traveler's Home Address: Street Address _____ Apt. N°: _____ <i>Adresse du Domicile du voyageur Rue N° d'Apt</i></p> <p>City: _____ State: _____ Zip Code _____ Country: _____ <i>Ville Etat Code Zip Pays</i></p> <p>Contact Information: Phone #: (_____) _____ E-mail: _____ <i>Contact N° de téléphone</i></p> <p>Emergency Contact: Name _____ Phone #: (_____) _____ Relationship _____ <i>Contact en Cas d'Urgence Nom N° de Téléphone Lien / Relation</i></p>	
6.	<p style="text-align: center;"><u>TYPE AND DURATION OF VISA REQUESTED / NATURE ET DUREE DU VISA SOLLICITE</u></p> <p>Reason(s) for Traveling: <input type="checkbox"/> Tourism/Tourisme <input type="checkbox"/> Business/Affaires <input type="checkbox"/> Studies/Etudes <input type="checkbox"/> Family/Famille <input type="checkbox"/> Visit/Visite <i>Motif(s) du Voyage <input type="checkbox"/> Official/Officiel <input type="checkbox"/> Transit/Transit <input type="checkbox"/> Other/Autre: _____</i></p> <p>Length of stay: <input type="checkbox"/> _____ Days <input type="checkbox"/> 1 Month <input type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/> Other: _____ <i>Durée du séjour Jours 1 mois 3 Mois 6 Mois Autre</i></p> <p>Number of Entries: <input type="checkbox"/> Single/Unique <input type="checkbox"/> Multiple/Multiple</p>	
<p>RESERVED TO THE CONSULAR SERVICE / RESERVE AU SERVICE CONSULAIRE</p> <hr/> <hr/> <p>DATE _____ VISA N° _____</p>		

7. TRAVEL ITINERARY / ITINERAIRE DE VOYAGE

Place of departure (City/State/Country): _____ Date of departure (DD/MM/YYYY): _____
Lieu de départ (Ville/Etat/Pays) Date de départ (JJ/MM/AAAA)

Transiting through (List airports, cities and countries, and transit dates) / *Transitant par (Citer les aéroports, villes et pays, et les dates de transit)*

Place of entry in Cameroon: _____ Date of entry (DD/MM/YYYY): _____ By Air Land Sea
Lieu d'entrée au Cameroun Date d'entrée (JJ/MM/AAAA) Par voie Aérienne Terrestre Maritime

Place of departure from Cameroon: _____ Date of departure (DD/MM/YYYY): _____ By Air Land Sea
Lieu de départ du Cameroun Date de départ (JJ/MM/AAAA) Par voie Aérienne Terrestre Maritime

8. REFERENCES IN CAMEROON AND ADDRESS DURING YOUR STAY / REFERENCES AU CAMEROUN ET ADRESSE PENDANT VOTRE SEJOUR

Notes: (1) When indicating the addresses/destinations: specify the quarter/village/area, the city and region, any landmark near the location.
(2) In case of multiple references/relatives or addresses/destinations during your stay in Cameroon: type the additional information on a separate letter-size sheet of paper titled "Section 8 – Addendum: Additional References/Relatives" or "Section 8: Addendum: Additional Addresses/Destinations".

Notes: (1) *Lorsque vous spécifiez les adresses/destinations: précisez le quartier, la zone ou le village, la ville et la région, tout point de repère reconnu à proximité.*
(2) *En cas de références/attaches familiales ou bien adresses/destinations multiples pendant votre séjour au Cameroun: saisir les informations additionnelles sur une feuille de papier de format lettre et inscrire comme titre « Section 8 – Addendum : Références/Attaches Familiales Additionnelles » ou bien « Section 8 – Addendum : Adresses/Destinations Additionnelles ».*

References in Cameroon: Name of individual and/or organization: _____
References in Cameroon Nom de l'individu et/ou de l'organisation

Address: _____
Adresse

Phone #: (_____) _____ E-mail: _____ Relationship: _____
N° de Téléphone Lien / Relation

Address/destination during your stay in Cameroon : Care of: _____ Name of Individual / Organization / Hotel: _____
Adresse/destination pendant votre séjour au Cameroun : Sous-couvert Nom de l'individu / l'Organisation / l'Hôtel

Address: _____
Adresse

Phone #: (_____) _____ E-mail: _____ Relationship: _____
N° de Téléphone Lien / Relation

Relatives in Cameroon: Name _____ Phone #: (_____) _____ Relationship _____
Attaches familiales au Cameroun Nom N° de Téléphone Lien de parenté

Address: _____
Adresse

9. Have you ever visited Cameroon? If yes, When?
Avez-vous déjà visité le Cameroun? Si oui, A quelle(s) date(s)? _____

Have you ever made an uninterrupted stay of more than three (03) months in Cameroon? YES/OU^(b) NO/NON
Avez-vous déjà habité le Cameroun pendant plus de trois (03) mois sans interruption ?

^(b) Specify the dates / Précisez à quelles dates: _____

Give names and addresses of businessmen/manufacturers you wish to meet if this is a business trip
Indiquez les noms et adresses des commerçants/industriels que vous désirez rencontrer s'il s'agit d'un voyage d'affaires: _____

Do you intend to establish a business in Cameroon? YES/OU^(c) NO/NON
Comptez-vous installer au Cameroun un commerce ou une industrie ?

^(c) Please specify/explain : _____
Veillez Spécifier/Expliquer _____

10. Do you agree not to accept any employment, either at a salary or for room and board during your stay in Cameroon, not to seek to remain in Cameroon permanently and to leave the Cameroonian territory at the expiration of the visa that may be granted to you?
Vous engagez-vous à n'accepter aucun emploi rémunéré ou au pair durant votre séjour au Cameroun, à ne pas chercher à vous y installer définitivement et à quitter le territoire à l'expiration du visa qui vous sera éventuellement accordé? YES/OUI NO/NON

11.

- My signature engages my responsibility and exposes me, in case of false statements, to being denied any Cameroonian visa in the future, in addition to any penalties imposed by law.
Ma signature engage ma responsabilité et m'expose, en sus de poursuites prévues par la loi en cas de fausse déclaration, à me voir refuser tout visa camerounais à l'avenir.
- A form that is not properly filled-out will not be considered and is subject to rejection.
Un formulaire indûment rempli ne sera pas pris en considération et fera l'objet d'un renvoi.

Signature (Must be that of the applicant, or legal guardian if the applicant is a minor) _____ Date _____
(Doit être celle du demandeur, ou du tuteur légal si le demandeur est mineur)



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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: _____

TO WHOM IT MAY CONCERN:

This letter is to confirm that Mr./Ms. (TRAVELER) is an employee of (COMPANY NAME), where he/she holds the position of (POSITION).

Mr./Ms. (TRAVELER) intends to travel to (CITY) for the purpose of (DETAILED EXPLANATION OF TRIP) with (COMPANY TO BE VISITED).

He/She will depart the United States on (DATE) and will remain in your country for (LENGTH OF TRIP). During this period, (EMPLOYER) will assume responsibility for Mr./Ms. (TRAVELER)'s maintenance and welfare and guarantees his/her repatriation. Additionally, Mr./Ms. (TRAVELER) has sufficient funds for the duration of the stay and has secured round-trip transportation to return to the United States.

We respectfully request that you grant Mr./Ms. (TRAVELER) a (SINGLE OR MULTIPLE)-entry business visa at your earliest convenience.

Thank you for your consideration.

Sincerely,
(SUPERVISOR'S SIGNATURE)

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