



# PHILIPPINES

## Visa Requirements:

- ! Signed Passport valid for six months with at least one blank visa page.
- ! One **NOTARIZED** visa application form.
- ! One passport sized photo 2" x 2" ONLY.
- ! Copy of itinerary or tickets from travel agency (Tourist visa).
- ! Copy of recent bank statement (Tourist visa).
- ! A letter of financial responsibility from the company in the U.S. (Business visa).
- ! Copy of your Green Card (For Non-U.S. Citizens).

## Processing Fees:

Processing Time:	American Visa of DC Fee	Embassy Fee	FedEx Shipping Fee	TOTAL
Five Days 3 Month Single:	\$65	\$40	\$30	\$135
Two Days 3 Month Single:	\$95	\$40	\$30	\$165
Five Days 6 Month Multiple:	\$65	\$80	\$30	\$175
Two Days 6 Month Multiple:	\$95	\$80	\$30	\$205
Five Days 12 Month Multiple:	\$65	\$120	\$30	\$215
Two Days 12 Month Multiple:	\$95	\$120	\$30	\$245

- ! Add \$15 for all Non U.S. citizens. Add \$25 if Embassy Fees are not prepaid by MO.

## Validity of Visas:

- ! Tourist and business visas are valid as indicated in table above

## Jurisdiction:

- ! Residents of the following states can be processed in Washington DC: AL, NC, PR, SC, TN, VA, WV, DC, FL, GA, KY AND MD.

## Payment Options:

- ! Payment may be made by personal or company check, money order or by credit card (American Express, Master Card, Visa or Discover Card).

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1801 Columbia Rd, NW #200, Washington, DC 20009

Tel: 202-462-5908 Fax: 202-387-5430

Email: [info@americanvisadc.com](mailto:info@americanvisadc.com)

[www.americanvisadc.com](http://www.americanvisadc.com)

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**APPLICATION FOR NON-IMMIGRANT VISA**

FA FORM NO. 2 ( 14 OCTOBER 2004 USA)

PLEASE TYPE OR PRINT ANSWERS LEGIBLY IN THE SPACES PROVIDED, IF NOT APPLICABLE WRITE N/A.			
1. NAME AS WRITTEN ON PASSPORT		<b>APPLICANT'S PHOTOGRAPH</b> 2 in. x 2 in.  1. Picture taken within the past 6 months 2. Front View 3. Without eyeglasses 4. Name and Signature on front bottom of photograph  Staple or paste photo here	
2. LAST NAME (surname or family name)			
3. FIRST NAME (all given names)			
4. MIDDLE NAME			
5. CITIZENSHIP	6. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		
8. PLACE OF BIRTH (city, state or province, country)		9. CIVIL STATUS <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED	
10. OCCUPATION			
11. IF MARRIED, NAME AND ADDRESS OF SPOUSE, OR IF WIDOWED, NAME OF DECEASED SPOUSE			
12a. TRAVEL DOCUMENT TYPE <input type="checkbox"/> PASSPORT <input type="checkbox"/> TRAVEL DOCUMENT	12b. PASSPORT / TRAVEL DOCUMENT NUMBER		
12c. PLACE OF ISSUE	12d. DATE OF ISSUE (dd/mm/yyyy)	12e. EXPIRY DATE (dd/mm/yyyy)	
13. PURPOSE OF TRIP TO THE PHILIPPINES	14. PORT OF ENTRY	15. ENTRIES REQUESTED: <input type="checkbox"/> SINGLE <input type="checkbox"/> MULTIPLE <input type="checkbox"/> MULTIPLE 3/6 MONTHS 1 YEAR	
16. INTENDED LENGTH OF STAY	17. EXPECTED DATE OF ARRIVAL		
18. SUPPORTING DOCUMENT(S) SUBMITTED: <input type="checkbox"/> PASSPORT <input type="checkbox"/> TRAVEL DOCUMENT <input type="checkbox"/> BANK STATEMENT <input type="checkbox"/> AIRLINE TICKET <input type="checkbox"/> ITINERARY <input type="checkbox"/> OTHERS: _____			
19. HOME ADDRESS IN U.S. OR COUNTRY OF RESIDENCE (house no., street, city, state, country, postal zone)			
20. MAILING ADDRESS (house no., street, city, state or province, country, postal zone)			
21. HOME TELEPHONE NUMBER		22. E-MAIL ADDRESS	
23. WORK ADDRESS			
24. WORK OR CONTACT TELEPHONE NUMBER		25. FAX NUMBER	
26. ADDRESS IN THE PHILIPPINES (house no., street, town or city, state or province, postal zone)			
27. NAME OF PERSONS TRAVELLING WITH APPLICANT AND INCLUDED IN PASSPORT OR TRAVEL DOCUMENT NAME AGE SEX			
28. REFERENCES AND /OR IMMEDIATE RELATIVES IN THE PHILIPPINES NAME ADDRESS a. _____ b. _____ c. _____			
29. WERE YOU EVER REFUSED ANY KIND OF VISA, OR DENIED ADMISSION INTO OR DEPORTED/REMOVED FROM THE PHILIPPINES AT GOVERNMENT EXPENSE? <input type="checkbox"/> YES (If yes, provide details) * <input type="checkbox"/> NO			
30. HAVE YOU EVER BEEN CHARGED OR CONVICTED OF ANY CRIMINAL OFFENSE IN ANY COUNTRY? <input type="checkbox"/> YES (If yes, provide details) * <input type="checkbox"/> NO			
31. DO YOU HAVE ANY COMMUNICABLE DISEASE OR HISTORY OF MENTAL ILLNESS? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, provide details) *			
32. VISA STATUS IN U.S. OR PLACE OF APPLICATION		33. ALIEN CERTIFICATE OF REGISTRATION NO.	
34. DATE OF APPLICATION		35. SIGNATURE OF APPLICANT	

FOR OFFICAL USE ONLY		
VISA NO.		
VISA SHEET NO.		
DATE OF ISSUE / REFUSAL		
DATE OF EXPIRY		
VISA CLASSIFICATION Non-Immigrant under Section _____ of the Philippine Immigration Act of 1940 as amended.		
PURPOSE <input type="checkbox"/> BUSINESS <input type="checkbox"/> PLEASURE <input type="checkbox"/> OTHERS: _____		
NUMBER OF ENTRIES <input type="checkbox"/> SINGLE <input type="checkbox"/> MULTIPLE <input type="checkbox"/> MULTIPLE 3/6 MONTHS 1 YEAR		
ANNOTATION <input type="checkbox"/> AUTHORIZED STAY NOT EXCEED 21 DAYS <input type="checkbox"/> AUTHORIZED STAY NOT EXCEED 59 DAYS <input type="checkbox"/> OTHERS: _____		
DATE OF RECEIPT OF APPLICATION		
RECEIVER	CASHIER	LOL
PROCESSOR	SCRIPTER	ENCODER
FEE	O.R. NUMBER	SERVICE NO.
VISA APPROVED / DENIED BY		
DOCUMENT RELEASED TO		
_____ PRINTED NAME AND SIGNATURE		
DATE RECEIVED		
MAIL/COURIER TRACKING NUMBER		

**APPLICATION SHALL BE COMPLETELY ACCOMPLISHED, ANSWERS TYPED OR PRINTED LEGIBLY AND ALL REQUIREMENTS SUBMITTED, OTHERWISE APPLICATION SHALL BE RETURNED UNPROCESSED.**

\* ADDITIONAL SPACE TO ANSWER NO. 29, 30 OR 31

36.

I understand that I may enter the Philippines at the port of entry designated by the Philippine Immigration Authorities under the conditions imposed by those authorities.

I solemnly swear under penalty of law that the foregoing statements are true and correct, and all supporting documents are authentic.

\_\_\_\_\_ **Date of Application**

\_\_\_\_\_ **Printed Name and Signature of Applicant**

**IMPORTANT: IF APPLICANT IS UNABLE TO APPLY IN PERSON, THIS FORM SHALL BE NOTARIZED.**

37.

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_\_\_\_  
at \_\_\_\_\_, the affiant exhibiting the following  
identification (type) \_\_\_\_\_ number \_\_\_\_\_,  
issued at \_\_\_\_\_, on \_\_\_\_\_.

\_\_\_\_\_ **NOTARY PUBLIC**

\_\_\_\_\_ **CONSUL**

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