

AMERICAN VISA OF DC

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

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

Email: info@americanvisadc.com or avodc@aol.com www.americanvisadc.com

THIS IS NOT AN APPLICATION; IT IS ONLY A COVERING LETTER FOR AMERICAN VISA OF DC

TANZANIA

Visa Requirements:

- Original signed passport valid for six months with at least one blank visa page.
- One visa application form completed and signed.
- Two color passport sized photos 2" X 2" ONLY on white background.
- Copy of flight itinerary or a copy of tickets (tourist AND business).
- Copy of bank statement or invoice receipt from the touring company (tourist visa).
- A letter of financial responsibility from the company in the USA (business visa).
- Invitation from sponsor in Tanzania (volunteer visa).
- Copy of the Green Card (For Non-U.S. Citizens).

Validity of Visas: Visas are valid for one year and allow for stays of up to 90 days for USA citizens.

Jurisdiction: Residents of all states can be processed in Washington DC.

Contact Person's Name: _____ Phone and email: _____

SHIPPING INSTRUCTIONS: Return completed process to:

Company Name (If applicable): _____ Contact Name _____
Address _____ Apt#/Mail Code _____
City _____ State _____ Zip Code _____
Phone # _____ Email Address _____

TRAVELER(S) INFORMATION:

Departure Date from U.S.A.: _____ **Need by this date:** _____ *Rush fees will be applied to meet this date if necessary

1) Last Name: _____ First Name _____

Passport #: _____ Passport Expires: _____ Date of Birth ____ / ____ / ____

2) Last Name: _____ First Name _____

Passport #: _____ Passport Expires: _____ Date of Birth ____ / ____ / ____

Processing Fees Per Person: (please check one)

Processing Time:	American Visa of DC Fee:	Tanzanian Embassy Fee	Money Order Fee	Fed Ex Shipping Fee	TOTAL
8 - 14 Business Days:	\$65	\$100	\$25	\$30	\$220
3 - 7 Business Days:	\$125	\$120	\$25	\$30	\$300
1 - 2 Business Days:	\$150	\$150	\$25	\$30	\$355
SAME DAY:	\$200	\$200	\$25	\$30	\$455

- Please add \$15 service fee for all Non-U.S. citizens, and the Embassy Fee may vary.

PAYMENT: (check one)

I authorize American Visa of DC to charge my credit card for payment of passport/visa services.

Card holders' name _____ Number _____ Exp. Date: _____

Signature _____ Today's Date: _____

Check or Money Order made out to "American Visa of DC" for \$ _____ enclosed.

My company has a prearranged billing agreement.

American Visa of DC Inc. assumes no responsibility for the loss, damage or delay of passports or visas caused by an Embassy, Consulate, government office, postal or courier service, delivery service or travel agency. All service fees and Embassy Fees are NON-REFUNDABLE and not dependant on the visa being issued or declined. Requirements and fees relating to this request are subject to change without notice.



THE EMBASSY OF THE UNITED REPUBLIC OF TANZANIA.

2139 R Street, NW Washington, DC, 20008.
Tel. (202) 939.6125 and (202) 884.1080 Fax (202) 797.7408.

FOR OFFICIAL USE ONLY

GRR NO. _____
VISA NO. _____
Ref. NO. _____

VISA APPLICATION FORM.

(Visa Regulations on the next page).

2 Passport Size
Photograph
Size: 2x2
Do not paste or
staple

- Surname or Family Name (Mr./Mrs./Miss/Ms/Dr./Prof.) _____
First Names in Full _____
Former or Maiden Name (if different from above) _____
- Date of Birth (DD/MM/YY) _____ Sex (M/F) _____
- Place of Birth _____ Country of Birth _____
Current Nationality (State if Dual Nationality) _____
Nationality at Birth _____
- Marital Status (Mark): Single Married Divorced Widowed Legally Separated.
- Passport No _____ Date Issued _____ Valid Until _____
Issued At _____ Issuing Authority _____
- Profession/Occupation _____
Employer Address: _____
- Current Address _____
Tel. _____ Fax _____ E-mail _____
- Name of Travel Agent/Tour Operator _____
- Contact Person(s) in Tanzania _____
Address _____
- Date of Entry _____ Departure Date _____
Duration of Stay _____ (Max. 90 Days)
- Type of Visa Requested** Travel Visa Transit Visa
- Purpose of visit**

<input type="checkbox"/> Leisure, Holiday <input type="checkbox"/> Visiting friends, relatives <input type="checkbox"/> Mission <input type="checkbox"/> Meeting, Conference	<input type="checkbox"/> Other Business <input type="checkbox"/> Study <input type="checkbox"/> Transit <input type="checkbox"/> Health Treatment	<input type="checkbox"/> Various <input type="checkbox"/> Diplomatic <input type="checkbox"/> Official <input type="checkbox"/> Same day visitor
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- Requested Number of Entries: Single Double Multiple.
- In Case Of Transit: Do you have an Entry Permit for the Final Country of Destination? No Yes Valid Until: _____
- Budget Available For Your Stay _____
- I Hereby Declare That The Information Stated Above Is True And Correct :

Signature of Applicant _____ Date _____