

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

INDONESIA

Visa Requirements:

- Original signed passport valid for six months with at least one blank visa page.
- Two visa applications signed and dated.
- Two color passport sized photos 2" X 2" on white or very light background.
- A letter of Financial Responsibility from the company in the USA (For business visa).
- Bank statement from the most recent two week period or a letter from the bank. (tourist visa).
- Invitation from the Company in Indonesia (For business visa).
- Copy of flight itinerary and hotel confirmation.
- Letter of employment indicating employment status. (For tourist visa).
- Copy of the Green Card (For Non-U.S. Citizens).

Validity of Visas: Tourist and business visas' validity for USA citizens will be determined by the visa officer -- 2 months to 1 year.

Jurisdiction: Applications sent to us that are not in this Embassy's jurisdiction will be processed at one of our affiliate offices.

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: (please check one)

Processing Time:	American Visa of DC Fee:	Indonesian Embassy Fee	Money Order Fee	Fed Ex Shipping Fee	TOTAL
10 - 14 Business Days, Tourism:	\$65	\$50	\$25	\$30	\$170
4 - 9 Business Days, Tourism:	\$95	\$50	\$25	\$30	\$200
10 - 14 Business Days, Business:	\$65	\$110	\$25	\$30	\$230
4 - 9 Business Days, Business:	\$95	\$110	\$25	\$30	\$260

- Please add \$15 service fee for all Non-U.S. citizens, and the Embassy Fee may vary.
- **SAME DAY and Next Day Service has been suspended and will not be available until further notice!**

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. Requirements and fees relating to this request are subject to change without notice.



The Embassy of The Republic of Indonesia in Washington D.C.

2020 Massachusetts Avenue NW, Washington, DC 20036

Phone. +1 (202) 775-5200, Fax. +1 (202) 775-5365 ,Email. infokonsuler@embassyofindonesia.org

Registration Number :

VISA APPLICATION FORM

I. GENERAL

Length of Stay in Indonesia: _____ **Day(s)** _____ **Month(s)** _____ **Year(s)**

Type of Visa: **Transit** **Single Visit** **Multiple Visit** **Limited Stay**

For Transit Purpose

Country of Destination: _____

Port of Departure: _____

Flight/Vessel Name: _____

For Visit Purpose

Tourism **Convention** **Family Visit** **Sport** **Study** **Arts**
 Commercial **Other**

Purpose of Visit: _____

Country of Destination: _____

Place of Visit: _____

Flight/Vessel Name: _____

For Limited Stay Purpose

Purpose of Limited Stay: **Work** **Joint Family** **Social** **Other**

Address in Indonesia: _____

City: _____

Province: _____

Phone Number: _____

Port of Entry into Indonesia: _____

Date of Entry: _____ - _____ - _____ **(DD-MM-YYYY)**

II. PERSONAL DATA

First Name: _____ Middle/Initial: _____

Last Name: _____

Sex: **Male** **Female**

Marital Status: **Single** **Married**

Place of Birth: _____

Date of Birth: _____ - _____ - _____ **(DD-MM-YYYY)**

Nationality: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ - _____ - _____

III. PASSPORT INFORMATION

Passport/Travel Document Number: _____
Place of Issue: _____
Date of Issue: _____
Date of Expired: _____

IV. SPONSORSHIP IN INDONESIA

Type of Sponsor: Individual Government International Institution
 Company NGO Others
Name of Sponsor: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number: _____ - _____ - _____

V. MISCELLANEOUS

Have You ever been to Indonesia before? Yes No
Are You in possession of any other countries travel documents? Yes No
Do You have previous visa to enter Indonesia? Yes No
Have Your visa application been denied before? Yes No
Have You ever been forced to leave Indonesia? Yes No
Have You ever been committed a crime or any offence? Yes No

Return/Through Ticket: _____
Place of Issue: _____
Date of Issue: _____ - _____ - _____ (DD-MM-YYYY)
Date of Expired: _____ - _____ - _____ (DD-MM-YYYY)

I hereby declare that the statements given above are true and I understand that even if granted a visa, admission at the airport remains the discretion of the Immigration authorities in Indonesia.

Applicant's Signature

_____, _____ - _____ - _____ (Place, DD-MM-YYYY)