

AMERICAN VISA OF DC

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

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

NIGER

Visa Requirements:

- Original signed passport valid for six months with at least one blank visa page.
- Three visa application forms completed and signed.
- Three color passport sized photos 2" X 2" ONLY on white background.
- Letter of financial responsibility from the company in the USA (business visa).
- Copy of bank statement showing at least \$500 (For tourist visa).
- Copy of flight itinerary and hotel confirmation (For tourist visa).
- An international certificate of vaccination against Yellow Fever.
- Copy of the Green Card (For Non-U.S. Citizens).

Validity of Visas: Tourist and business visas' validity is stays up to 90 days, multiple entry and 1 year validity.

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: (please check one)

Processing Time:	American Visa of DC Fee:	Niger Embassy Fee	Money Order Fee	Fed Ex Shipping Fee	TOTAL
10 - 14 Business Days:	\$65	\$100	\$25	\$30	\$220
6 - 9 Business Days:	\$95	\$140	\$25	\$30	\$290
3 - 5 Business Days :	\$125	\$140	\$25	\$30	\$320

- Please add \$15 service fee for all Non-U.S. citizens, and the Embassy Fee will 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. Requirements and fees relating to this request are subject to change without notice.



EMBASSY OF THE REPUBLIQUE OF NIGER
2204 R Street, NW, Washington, DC 20008, USA

Photograph

VISA APPLICATION FORM

1. Applicant's Information

Last Name:		First Name:	
Date of birth:		Place of birth:	
Occupation:		Nationality:	
Gender: <input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Single <input type="checkbox"/> Married	
Address in the USA/place of residence:		Address in Niger:	
Tel: (private):		(business):	
		E-mail:	
Date of entry in Niger:		Airline:	
		Flight No.:	
Length of stay:		City of disembarkation:	
Have you previously visited Niger? <input type="checkbox"/> Yes <input type="checkbox"/> No When?			
Purpose of visit: <input type="checkbox"/> Student <input type="checkbox"/> Diplomat <input type="checkbox"/> Official <input type="checkbox"/> Tourism <input type="checkbox"/> Family			
<input type="checkbox"/> Business <input type="checkbox"/> Other (specify):			
Name of the person accompanying the applicant:			Relation:

2. Passport Information

Passport No.:	
Date issued:	Expiration Date:

3. Emergency contacts

in Niger:	In the USA/place of residence
Last and First Name :	Last and First Name:
Tel:	Tel:
Relation to the applicant:	Relation to the applicant:

4. Certification: I, undersigned, certify that all the information provided are correct, and that I will abide by the laws of the Republic of Niger during my stay.

Signature:	Date:

Official Use Only: Do not write below

No du visa: _____	Date de délivrance _____
Validité du visa _____	Signature _____
Taxes perçues _____	Mention (s) _____