

## The Travel Visa Company

Your Dedicated, Worldwide Travel Visa Agency



### REFERRED BY

i.e. Travel Agent / Tour Operator / Cruise Line / Search Engine / Repeat Customer / Friend / Other

You **MUST** return this front page with your application.

### RETURN ADDRESS

#### The Travel Visa Company Ltd.

Unit 2A, The Courtyard  
Regents Park, London Road  
Nantwich, Cheshire  
CW5 6LW



### SUPPORT

If you have any queries or would like additional assistance when completing your application, please contact us and one of our team would be happy to assist.



Telephone: **01270 904 907**



Email: **[applications@thetravelvisacompany.co.uk](mailto:applications@thetravelvisacompany.co.uk)**



## Algeria Business Visa Application Pack

Thank you for requesting an application pack for an Algeria Business Visa.

Please complete the following three sections and then return the application pack and all supporting documents to The Travel Visa Company Ltd.

### 1. Checklist of the documents required

### 2. Service and delivery options

### 3. Address and payment details

#### PLEASE NOTE

An Algeria Business Visa is valid for either 6 or 12 months from the date of issue and permits either a single or multiple entries of up to 90 days, depending on the type of visa you are issued.

The Algerian Consulate state that your proposed date of travel will not affect their processing time. As such, we highly recommend all visa applications are submitted to The Travel Visa Company as early as possible.


## 1. Checklist of the documents required

✓ Please tick to confirm you have provided the following:

- ☐ **ALGERIA BUSINESS VISA APPLICATION FORM** – Please find attached. It is important to carefully read through all the questions and fully complete all forms in **BLOCK CAPITALS** with a **BLACK PEN**. All application forms **MUST** be printed single-sided. Application forms printed double-sided **WILL NOT** be accepted.
- ☐ **PASSPORT** – Please include your original passport. Your passport must be valid for at least 6 months from your departure date from Algeria and must have at least 3 blank visa pages.
- ☐ **PHOTOGRAPH x2** – The photograph must be standard passport size, taken within the last 6 months, against a light background, printed on photographic paper, be full face and non-smiling [without sunglasses, a hat/cap or other head covering, unless the applicant wears such items because of their religious belief or ethnic background].
  - **COPY OF PREVIOUS ALGERIA VISA(S)** – If you have previously held a visa for Algeria, please include a copy of each page in your passport or previous passports containing an Algeria visa. If you intend to apply for a multiple entry visa, you must be able to demonstrate you have held a visa previously.



- ☐ **LETTER OF EMPLOYMENT** – Please include a letter from your employer. The letter must state that you are an employee of their organisation, the role which you occupy and your length of employment. It should also include your purpose of visit to Algeria.
- ☐ **LETTER OF INVITATION** – The letter of invitation must come from the inviting company in Algeria and include the applicant's name and passport details, the purpose of travel and the proposed travel dates.

 Failure to provide us with these documents will result in delays with your application.

## 2. Service and delivery options

✓ Please tick to confirm which service and delivery type you are requesting:

	Service Type	Processing Time	Embassy Fee	Courier Fee	Service Fee	VAT	Total
<input type="checkbox"/>	Standard	25 days*	£85.00	£20.00	£104.13	£20.83	<b>£229.95</b>

\*Working days excluding postal days.



	Delivery Type	Price
<input type="checkbox"/>	Royal Mail Special Delivery	£10.00
<input type="checkbox"/>	Provide Pre-Paid Special Delivery Envelope*	-
<input type="checkbox"/>	Collect from TVC Office	-

#### DATE OF TRAVEL

DD ..... MM ..... YYYY .....

#### LENGTH OF STAY

..... Days

\*If you provide a pre-paid envelope please ensure it has your return address and the correct postage amount.

### 3. Address and payment details

Name: .....

Address: .....

.....

.....

Postcode: .....

Telephone: .....

Email: .....

#### ☐ Credit/Debit Card

Name on card:

.....

Card Number:

.....

Expiry Date: ..... CVC: .....

#### ☐ Paypal [paypal@thetravelvisacompany.co.uk](mailto:paypal@thetravelvisacompany.co.uk)

#### ☐ Cheque

#### ☐ BACS Reference: .....

#### EMAIL MARKETING (not required)

☐ I would like to sign up to the TVC mailing list.

We do not share your data with any third parties. To view our privacy policy, visit:

[www.thetravelvisacompany.co.uk/privacy](http://www.thetravelvisacompany.co.uk/privacy)

Cheque/BACS payments are to be made payable to "The Travel Visa Company Ltd."

Bank Details: 68032405 / 08-92-50

#### TERMS & CONDITIONS (required)

☐ I have read, fully understood and agree to the Terms & Conditions and Client Declaration.

[www.thetravelvisacompany.co.uk/terms](http://www.thetravelvisacompany.co.uk/terms)

[www.thetravelvisacompany.co.uk/declaration](http://www.thetravelvisacompany.co.uk/declaration)

Signed: ..... Date: .....

Please contact us if you would like to receive a printed copy of these documents.



## Personal Details

Surname:	<input type="text"/>	As shown in passport
Given name(s):	<input type="text"/>	As shown in passport
Maiden name:	<input type="text"/>	If applicable
Date of birth:	<input type="text"/>	DD/MM/YYYY
Place of birth:	<input type="text"/>	
Town/City:	<input type="text"/>	
State/Province:	<input type="text"/>	
Country:	<input type="text"/>	
Nationality:	<input type="text"/>	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Marital status:	<input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widowed	
	<input type="checkbox"/> Other <input type="text"/>	
<i>If you are married or widowed, please provide the following details:</i>		
Spouse surname:	<input type="text"/>	
Spouse given name(s):	<input type="text"/>	
Spouse nationality:	<input type="text"/>	
Spouse place of birth:	<input type="text"/>	
Spouse date of birth:	<input type="text"/>	DD/MM/YYYY

## Passport Details

Passport type:	<input type="checkbox"/> Regular <input type="checkbox"/> Official <input type="checkbox"/> Diplomatic	
Passport number:	<input type="text"/>	
Issuing country:	<input type="text"/>	
Issuing authority:	<input type="text"/>	
Issue date:	<input type="text"/>	DD/MM/YYYY
Expiry date:	<input type="text"/>	DD/MM/YYYY

## Applicant Contact Details

Phone number:	<input type="text"/>	+44
Email address:	<input type="text"/>	
Current address:	<input type="text"/>	
Street:	<input type="text"/>	
Town/City:	<input type="text"/>	
State/Province:	<input type="text"/>	
Postcode:	<input type="text"/>	
Country:	<input type="text"/>	

## Family Details

Father's surname:	<input type="text"/>
Father's given name(s):	<input type="text"/>
Mother's surname:	<input type="text"/>
Mother's given name(s):	<input type="text"/>
Do you have any children?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<div>If yes</div> Are any of your children travelling with you?	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Employment Details

Occupation:	<input type="text"/>
Employer name:	<input type="text"/>
Employer address:	<input type="text"/>
Street:	<input type="text"/>
Town/City:	<input type="text"/>
State/Province:	<input type="text"/>
Postcode:	<input type="text"/>
Country:	<input type="text"/>



## Travel Details

Date of arrival into Algeria:

DD/MM/YYYY

Date of departure from Algeria:

DD/MM/YYYY

Address in Algeria:

Street:

Town/City:

State/Province:

Postcode:

Country:

Telephone number in Algeria:

Country you will be travelling to following departure from Algeria:

Number of entries requested:

- ☐ Single entry  
☐ Double entry  
☐ Multiple entry

Have you previously visited Algeria?

- ☐ Yes ☐ No

If yes

Have many times have you visited Algeria?

Please detail dates of previous visit(s):

Please tick to confirm you have read, fully understood and agree to the following:

☐

I, the applicant, hereby certify that I have read, or have had read to me, all the questions and statements on this application and understand all the questions and statements on this application. The answers and information furnished in this application are true and correct to the best of my knowledge and belief.

Print name (BLOCK CAPITALS): .....

(DD/MM/YYYY)

Date: .....