

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





Algeria Tourist Visa Application Pack

Thank you for requesting an application pack for an Algeria Tourist 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 Tourist 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 TOURIST 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].
	CODY OF PREVIOUS ALCEPIA VICA/S). If

 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.
П	HOTEL CONFIRMATION – Please include a copy of your hotel booking confirmation. This

must include your name, hotel name and address, and check in/out dates.

o **LETTER OF INVITATION** – If you are being invited to Algeria, please provide an invitation letter certified by the local authorities (town hall) in Algeria. The letter needs to include your name, the name of the person inviting you, your relationship and the address you will be staying in Algeria.

• 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
Standard	25 days*	£85.00	£20.00	£104.13	£20.83	£229.95

*Working days excluding postal days.





	Delivery Type	Price		DATE OF TRAVEL		
	Royal Mail Special Delivery	£10.00		DD MM YYYY		
	Provide Pre-Paid Special Delivery Envelope*	-		LENGTH OF STAY		
	Collect from TVC Office	-		Days		
3	*If you provide a pre-paid envelope Address and paymen		e it has your r	eturn address and the correct postage amount.		
Name	:			Credit/Debit Card		
Addre	SS:			Name on card:		
				Card Number:		
Postc	ode:			Foreign Date CVC		
Telep	none:			Expiry Date: CVC:		
Email:			Ш	Paypal paypal@thetravelvisacompany.co.uk		
LIIIaii				Cheque		
	EMAIL MARKETING (not req	uired)		BACS Reference:		
	I would like to sign up to the TVC We do not share your data with an parties. To view our privacy policy www.thetravelvisacompany.co.uk	ny third r, visit:		Cheque/BACS payments are to be made payable to "The Travel Visa Company Ltd." Bank Details: 68032405 / 08-92-50		
	TERMS & CONDITIONS (really understood and www.thetravelvisacompany.co.u	d agree to the		ditions and Client Declaration. etravelvisacompany.co.uk/declaration		



Date:

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



Algeria Tourist Visa Application Form

Tel: +44 (0) 1270 904 907 applications@thetravelvisacompany.co.uk www.thetravelvisacompany.co.uk

Personal Details

Surname:

	As shown in passport
Given name(s):	
	As shown in passport
Maiden name:	
	If applicable
Date of birth:	DD/MM/YYYY
Place of birth:	
Town/City:	
State/Province: Country:	
Nationality:	
Gender: Male Female	
Marital status: Married Divorced	Single Widowed
Other	
If you are married or widowed, please provide th	e following details:
Spouse surname:	
Spouse given name(s):	
Spouse nationality:	
Spouse place of birth:	
Spouse date of birth:	DD/MM/YYYY
Passport Details	
Passport type: Regular Official	Diplomatic
Passport number:	
Issuing country:	
Issuing authority:	
Issue date:	DD/MM/YYYY
Expiry date:	DD/MM/YYYY

Applicant Contact Details

Phone number:		
+44		
Email address:		
Current address:		
Street:		
Town/City:		
State/Province:		
Postcode:		
Country:		

Family Details

Father's surname:		
_Father's given name(s):		
_Mother's surname:		
Mother's given name(s):		
Do you have any children?		
☐ Yes ☐ No		
Are any of your children travelling with you?		

Employment Details

Occupation:		
Employer name:		
Employer address:		
Street:		
Town/City:		
State/Province:		
Postcode:		
Country:		



Algeria Tourist Visa Application Form

Tel: +44 (0) 1270 904 907 applications@thetravelvisacompany.co.uk www.thetravelvisacompany.co.uk

Travel Details

Date of an	rival into Algeria:
	DD/MM/YYYY
Date of de	parture from Algeria:
	DD/MM/YYYY
Address in	n Algeria:
Street:	
Town/City:	
State/Prov	ince:
Postcode:	
Country:	
Telephone	e number in Algeria:
Country yo Algeria:	ou will be travelling to following departure from
Number o	of entries requested:
Double	
_	
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):
	rease detail dates of previous visit(s).
I, the state appl	confirm you have read, fully understood and agree to the following applicant, hereby certify that I have read, or have had read to me, all the questions and ments on this application and understand all the questions and statements on this cation. The answers and information furnished in this application are true and correct e best of my knowledge and belief.
rint name (BL	OCK CAPITALS):
	(DD/MM/YYYY)
ate:	

