

## 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)**

## Azerbaijan Tourist e-Visa Application Pack

Thank you for requesting an application pack for an Azerbaijan Tourist E-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


Your passport should be valid for at least 6 months from the date of arrival in Azerbaijan and have at least two blank visa pages. Once issued, the e-Visa will be valid for 90 days and permits a single entry of up to 30 days.

If you are transiting through Azerbaijan you will not require an e-Visa.

### 1. Checklist of the documents required

✓ Please tick to confirm you have provided the following:

- ☐ **AZERBAIJAN E-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.
- ☐ **COPY OF PASSPORT** – Please include a copy of the photograph/information page of your passport. Your passport must be valid for at least 6 months upon return to the UK.

 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	Service Fee	VAT	Total
<input type="checkbox"/>	Standard	10 days*	£20.00	£41.63	£8.32	<b>£69.95</b>
<input type="checkbox"/>	Priority	5 days*	£47.00	£44.13	£8.82	<b>£99.95</b>

\*Working days excluding postal days.

	Delivery Type	Price
<input type="checkbox"/>	Email Confirmation	-
<input type="checkbox"/>	Provide Pre-Paid Envelope*	-
<input type="checkbox"/>	Posted Confirmation	£5.00
<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☐ **Cheque**☐ **BACS** Reference: .....

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

Bank Details: 68032405 / 08-92-50

**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)**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.

## Applicant Details

Surname:	<input type="text" value="As shown in passport"/>
Given name(s):	<input type="text" value="As shown in passport"/>
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of birth:	<input type="text" value="DD/MM/YYYY"/>
Place of birth:	
Town/City:	<input type="text"/>
State/Province:	<input type="text"/>
Country:	<input type="text"/>
Nationality:	<input type="text"/>
Occupation:	<input type="text"/>

## 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" value="DD/MM/YYYY"/>
Expiry date:	<input type="text" value="DD/MM/YYYY"/>

## Applicant Contact Details

Phone number:	<input type="text" value="+44"/>
Email address:	<input type="text"/>
Current address:	
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:	<input type="text" value="DD/MM/YYYY"/>
Purpose of travel:	<input type="checkbox"/> Tourism <input type="checkbox"/> Business <input type="checkbox"/> Education <input type="checkbox"/> Medical treatment
Address in Azerbaijan:	
Street:	<input type="text"/>
Town/City:	<input type="text"/>
State/Province:	<input type="text"/>
Postcode:	<input type="text"/>
Country:	<input type="text"/>
Have you ever visited the Nagorno-Karabakh and other regions of the Republic of Azerbaijan occupied by the Republic of Armenia since 1991 without an official permission of the Republic of Azerbaijan?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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): .....

Date: ..... (DD/MM/YYYY)