

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.

First Floor Unit 10
Alvaston Business Park
Middlewich Road
Nantwich, Cheshire
CW5 6PF



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**

Seychelles Tourist ETA Application Pack

Thank you for requesting an application pack for a Seychelles Tourist ETA.

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

A Seychelles ETA is valid for 3 months from the date of issue and permits a single entry of up to 90 days. Once you arrive, you can apply for 3-month extensions up to a maximum period of 12 months in total (additional fees apply).

Once issued, the ETA will be electronically tagged to the chip in your passport and eliminates the need for physical documents or visiting an embassy/consulate.

The Seychelles immigration department do withhold the right to request additional supporting documentation.

1. Checklist of the documents required

✓ Please tick to confirm you have provided the following:

- ☐ **SEYCHELLES ETA 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 page of your passport. Your passport must be valid for at least 6 months upon arrival into the Seychelles.
- ☐ **PHOTOGRAPH x1** – The photograph must be 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].

- ☐ **TRAVEL ITINERARY** – A copy of your hotel and flight booking confirmations or cruise itinerary. All itineraries **MUST** include **ALL** travellers' names, hotel names and addresses, and check in and out dates.
- ☐ **INVITATION LETTER** – If visiting family and friends in the Seychelles, a letter of invitation is required including a copy of their Seychelles ID Card or passport photograph page with a valid visa for the Seychelles.

 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:

SINGLE ENTRY ETA

Valid for 3 months from the date of issue and permits a single entry of up to 90 days into the Seychelles.

Once you arrive, you can apply for 3-month extensions up to a maximum period of 12 months in total (additional fees apply).

	Service Type	Processing Time	Embassy Fee	Service Fee	VAT	Total
☐	Standard	15 days*	£12.00	£44.96	£8.99	£65.95
☐	Priority	5 days*	£32.00	£56.63	£11.32	£99.95

*Working days excluding postal days.

 If selecting our priority service, please address to "The Travel Visa Company – Priority".

	Delivery Type	Price
☐	Email Confirmation	-
☐	Provide Pre-Paid Envelope*	-
☐	Posted Confirmation	£5.00
☐	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:

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

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

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:

As shown in passport

Given name(s):

As shown in passport

Date of birth:

DD/MM/YYYY

Place of birth:

Town/City:

State/Province/County:

Country:

Gender:

- ☐ Male
☐ Female

Current nationality:

Nationality at birth:

Current occupation:

Passport Details

Passport type: ☐ Regular ☐ Official ☐ Diplomatic

Passport number:

Issuing country:

Issue date:

DD/MM/YYYY

Expiry date:

DD/MM/YYYY

Applicant Contact Details

Phone number:

+44

Email address:

Address:

Emergency Contact Details

Emergency contact name:

Emergency contact telephone number:

Travel Details

Purpose of travel:

Arriving into Seychelles by:

☐ Air ☐ Sea

If air

Airline:

Flight number:

Arrival airport:

If sea

Vessel name:

Arrival seaport:

Date of arrival into Seychelles:

DD/MM/YYYY

Departing Seychelles by:

☐ Air ☐ Sea

If air

Airline:

Flight number:

Arrival airport:

If sea

Vessel name:

Arrival seaport:

Date of departure from Seychelles:

DD/MM/YYYY

Length of stay:

Days

Traveller Eligibility Questions

Have you visited any countries in the 30 days prior to your arrival in Seychelles?

☐ Yes ☐ No

If yes

Countries visited:

In the past 30 days, have you experienced an acute illness with a fever of over 38°C (101°F) accompanied by a severe headache, swollen glands, back pain, muscle ache, or intense fatigue, followed by a progressively developing rash that spread over your entire body, including the soles of your feet and the palms of your hands?

☐ Yes ☐ No

Are you or will you be bringing into Seychelles any animal or plant, any product of animal or plant origin, any kind of biological specimen or any tool or equipment used for rearing of animals and cultivation of plants?

☐ Yes ☐ No

Will you be bringing more than your duty free alcohol allowance, which is either: 4 litres alcoholic beverages less than 16% ABV or 2 litres above 16% ABV?

☐ Yes ☐ No

Will you be bringing more than your duty free perfume allowance, which is a maximum of a 200ml bottle of perfume?

☐ Yes ☐ No

Will you be bringing more than your duty free tobacco allowance, which is either: 200 cigarettes OR 100 cigarillos OR 50 cigars OR 200g of tobacco product?

☐ Yes ☐ No

Do you or will you have in your possession controlled substances, obscene articles, toxic substances, similar Seychelles military wear, firearms, spear guns, or any dangerous weapons?

☐ Yes ☐ No

Do you have in your possession or will you be carrying any commercial merchandise?

☐ Yes ☐ No

Do you or will you have any goods that belongs to another person in your possession?

☐ Yes ☐ No

In the past 14 days, have you visited a forest, farm, nature park, or had any contact with farm animals or visited any properties that slaughters or processes animals?

☐ Yes ☐ No

Emergency Contact Details

Does the total value of all goods that were purchased abroad and that will remain the Seychelles exceed SCR 15,000 (approx. £950/US\$1000) or foreign equivalent?

☐ Yes ☐ No

Are you or will you be transporting currency or monetary instruments (e.g., bearer negotiable instruments including cheque, bill of exchange, promissory note, traveller's cheque, bearer bond, money order, etc.) of a value greater than SCR 50,000 (approx. £3500/US\$3500) or foreign equivalent, in or out of the country?

☐ Yes ☐ No

If yes

Please specify:

Please include all items in their relevant currency and the total value of each item.

Please tick to confirm your application details:

☐ 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