TRAVEL VISA PRO



Call us for assistance – Toll-free: (202) 684-7150 Fax: (866) 511-7599 www.TravelVisaPro.com

Saudi Visa Instructions

Business Visas:

- The Kingdom of Saudi Arabia requires all applicants to submit an Enjazit application with your documents. Travel Visa Pro provides this since we are a Registered Agent of the Saudi Embassy.
- O Valid US/Non US passport which must be signed and have two blank, adjacent pages AND six months validity.
- O Non-US citizens must send proof of status in the USA, i.e., green card copy, H1B1, alien registration card, student visa, etc.
- One completed and signed application signed in blue/black ink (enclosed).
- O One signed "Declaration of Saudi Laws" (enclosed).
- O One passport style photo with dimensions 2" x 2" with a white background.
- O An official invitation letter from the Kingdom of Saudi Arabia. This invite can be faxed or emailed to enjaz@travelvisapro.com for translations and verification prior to sending your documents.
- O A business letter from your US Company written on the company's letterhead. It must explain the purpose of trip, dates, and a financial guarantee. This letter must be signed by someone than the applicant UNLESS you are the owner of the company. Lastly, the letter must specify the number of entries and validity requested (sample enclosed).
- O Proof of airline tickets or itinerary (case by case).

Visa Validity, number of entries, and length of stay will be dictated by the letter from Saudi Arabia

**** Please see next page for pricing guidelines****

Fees/Processing times:

For US Citizens:

Processing Time	Consular Fee	Enjaz Fee	Service Fee	Total
next day	\$108	\$30	\$399	\$537
2-3 days	\$108	\$30	\$199	\$337
5 days	\$108	\$30	\$169	\$307
6-8 days	\$108	\$30	\$119	\$257

For Non-US Citizens Single:

Processing Time	Consular Fee	Enjaz Fee	Service Fee	Total
next day	\$54	\$30	\$399	\$483
2-3 days	\$54	\$30	\$199	\$283
5 days	\$54	\$30	\$169	\$253
6-8 days	\$54	\$30	\$119	\$203

For Non-US Citizens Multiple:

Processing Time	Consular Fee	Enjaz Fee	Service Fee	Total
next day	\$134	\$30	\$399	\$563
2-3 days	\$134	\$30	\$199	\$363
5 days	\$134	\$30	\$169	\$333
6-8 days	\$134	\$30	\$119	\$283

Shipping your documents:

Please ship all documents to: Travel Visa Pro Saudi Arabian Visa Department 1802 Vernon ST NW Washington, DC 20009



www.TravelVisaPro.com

Saudi Arabia Visa Order Form

Thank you for considering Travel Visa Pro to process your Saudi Arabia Visa. At this point, you should already have your invitation letter from KSA. If you have any questions about this or the rest of the process, please call us at 202-684-7150.

TRAVELER(S) INFORMATION:	
1. Dates of trip: ENTRY/ EX	KIT//
2. Date passports are needed back://	3. Number of Travelers:
4. Travelers' names (first and last):	
5. Please specify the nationalities of all travelers:	
SERVICES REQUESTED:	
□ Business Visa □ Family Visit Visa □ Governme	nt Visa □ Employment Visa* □ Escort Visa
□ Residence Visa □ Enjaz only □ Attestations/Auth	entications □ 72 hour Transit Visa □ Work Visit
□ Other (please explain):	
authorize Travel Visa Pro to add \$9.99 charge per person to other fe http://www.travelvisapro.com/index.php?travel,do.index. *employment visas come included with all necessary a	RAGE FOR \$9.99. By checking this box, I agree to enroll into passport replacement program. I see paid. I have read and understood all terms and conditions of the program which are posted at authentications; processing time is set at a tentative 5-10 business days
PROCESSING TIME REQUESTED*:	
	□ 6-8 days
* Certain visa types have fixed processing times	11
† Next day processing is not available for all cases. Ple	ase call us to discuss your case.
RETURN DOCUMENTS TO THIS ADDRESS:	
Contact Name:	Company:
Address:	Company:
E-mail:	_ Signature Required for Delivery? □ YES □ NO
Phone: _() Cell: _()	Fax: _()
Shipping Method :	
□ \$0 (will include my own postage) □ \$39 FedEx Sta	andard Overnight to states of HI, AK, or PR
	OAY FedEx Overnight
□ \$20 FedEx Standard Overnight	
□ \$25 FedEx Priority Overnight □ from \$39 for l	
PAYMENT METHOD FOR APPLICABLE FEES:	
PAID BY □ Credit Card □ Money Order □ Check #	
	st of its professional visa and passport services to the following card. I agree to
	to terms and conditions. I understand that requirements, fees, and processing
	I fees are non-refundable. An administrative fee of \$17 will be added to
cancelled orders. Orders cannot be cancelled once doc	
Name on Card:	Signature: xpiration Date: / Security Code:
Billing Address: □ Same as Shipping □ Oth	er:
Than	nk you and have a safe trip!

In San Francisco: 2021 Fillmore Street San Francisco, CA 94115 (415)-229-3210 info@travelvisapro.com

In Washington DC: 1802 Vernon Street NW Washington, DC 20009 (202)-684-7150 dc@travelvisapro.com In New York: 167 Madison Ave., Ste 201 New York, NY 10016 (212)-380-7866 Email: ny@travelvisapro.com In Los Angeles: 373 S Doheny Drive, Ste B Beverly Hills, CA 90211 (310)-878-2590 la@travelvisapro.com

In Houston: 3401 Louisiana St, Ste 130 Houston, TX 77002

com

(713)-936-0773 houston@travelvisapro. In Seattle: 600 First Ave, Ste 425 Seattle, WA 98104 (206)-855-5185 seattle@travelvisapro.com



NOTICE ON SAUDI LAWS AND REGULATIONS

I hereby undertake to give my fingerprints and my eye iris pattern images and comply with the laws of the Kingdom of Saudi Arabia.

I, the undersigned, hereby agree to have my fingerprint and iris data (biometrics) captured as part of the application procedure for an entry visa to the Kingdom of Saudi Arabia. I further agree and declare as follows:

- 1. If granted the visa, I shall abide by all the laws and regulations of the Kingdom of Saudi Arabia and respect the Islamic customs and traditions of its people;
- 2. I am aware that all alcoholic beverages, narcotics and other illegal drugs, pornographic materials or publications that violate the social norms of decency and all other publications that are disrespectful of any religious belief or political orientation are prohibited and shall not be brought into the Kingdom of Saudi Arabia;
- 3. I am also fully aware that the crime of smuggling narcotics and other illegal drugs into the Kingdom of Saudi Arabia is punishable by the death penalty;
- 4. I have never been removed, excluded or deported from the Kingdom of Saudi Arabia or from any other Gulf Cooperation Council member state or charged with violation of any law or regulation thereof;
- 5. I agree to depart the Kingdom of Saudi Arabia on or before the expiration date of my visa. I am well aware that any violation of the laws and regulations of the Kingdom or any engagement in prohibited activities, such as the activities mentioned herein or in the entry visa documentation, are subject to the penalties described in the "Dealing with Persons on Entry Visas" statute, as enacted by Royal Decree No. 42, dated 10/18/1404 H;
- 6. I acknowledge and reaffirm my declaration that this application and the evidence submitted with it are all true and correct. I also understand that if I submit any false information or if my name was found to be listed as banned from entry into the Kingdom of Saudi Arabia, my application will be denied or my visa, if already granted, revoked. Moreover, I may be turned back from any Saudi port of entry at my own expense, while I shall have no right to demand compensation.

Name (Please print): _	
Signature:	
Date:	

صورة

Photo



سفارة المملكة العربية السعودية واشنطن القسم القنصلي

Royal Embassy of Saudi Arabia Washington Consular Section

First Name:	Middle Name:	Last Name:			الإسم الكامل:
Mother's Name:					إسم الأم:
Date of Birth:	تاريخ الولادة:	Place of Birth	•		محل الولادة:
Previous Nationality:	الجنسية السابقة:	Present Nation	nality:		الجنسية الحالية:
Place of Issue:	محل الإصدار:	Passport No:			رقم الجواز:
Expiration Date:	تاريخ انتهاء صلاحية الجواز:	Date of Issue:			تاريخ الإصدار: الحالة الاجتماعية:
Sex:	الجنس: الجنس: ذكر أنثى	Martial Status:	Single	عازب	الحالة الاجتماعية: متزوج
Female Male Religion:	دخر اننی	Marrieu	Single		-
Profession:	المشاهل العام	Qualification:			الديانة:
Home Address and Telephor	*	Quanneation:		التلفون:	المهنة: عنوان المنزل ورقم
Trome reduces and receptor					, 33 23
E-mail Address:					البريد الألكتروني:
Business Address and Teleph	none No:		:	ئسسىة) ورقم التلفون	عنوان الشركة (المو
Purpose of Travel:	1		ī., , , , ,	ī	الغاية من السفر:
اِقامة عمل عمل Employment Residence	Student Umrah	Hajj \square	Diplomat \Box	Special	تخصیه Personnel
مرور تمدید عودهٔ Re-Entry Transit T	تجارية سياحة Ourism Commerce I	رجال اعمال Businessmen G	حكومية overnment	زيارة عمل Work Visit	زيارة عائلة Family Visit
				ا أخرى Others	مرافق Companion
Method of Payment: By	enjaz Only			عن طريق انجاز فقط	طريقة الدفع:
Name and Address of Company or Individual invitee in the Kingdom: اسم وعنوان الشركة أو اسم الشخص الداعي وعنوانه بالمملكة:					
Travel Information:		<u> </u>			معلومات السفر
Date of arrival in Saudi Ara	bia:	Via Airline:		Flight No:	
City of Embarkation:			Port of E	ntry:	
Duration of Stay in the King	gdom:			•	
	صلته:				اسم المحرم:
Name of traveling companio		Relationship	of the perso	n traveling wi	, , ,
*** Application must be filed out in its entirety ***					
I, the undersigned, hereby certify	that:				
• I agree to have my fingerpri	ints taken and my Iris scanne	ed.	مة الاصابع	اوافق على اخذ بصــ	 أنا الموقع أدناه وقرحية العين
	d is correct. I will abide by the period of my residence.			طومات التي دونتها	• أقر بأن كل المع
التاريخ:		التوقيع:	بها.	أثناء فترة وجودي	بقوانين المملكة الإسم:
Name:	Signature:			Date:	

<<<YOUR COMPANY'S LETTERHEAD>>>

To: Consulate General of << Country>>

<<DATE>>

Dear Consul General:

This letter is to confirm that Mr./ Mrs. << Your First and Last Names>> is one of our employees who is engaged as a(n) << Position>> for << Your Company Name>>. Mr./ Mrs. << Your Last Name>> has been with << Your Company>> for the last << #>> years, and will be traveling to << city>>, << country>> from << date of entry>> to << date of exit>> for total of << #>> of days to conduct the following business activities:

- 1. << Detail as much as possible the business to be conducted>>
- 2. <<more details>>
- 3. <<more details>>

While in your country, Mr./Mrs. <<Your Last Name>> will visit <<Person name>>, <<Person Title>>, <<Visiting Company's Name, Address, and Phone Number>>.

Mr./Mrs. <<Your Last Name>> will be staying at <<hotel name, address, and phone number>> during the trip. <<Company Name>> hereby guarantees sufficient funds for Mr./ Mrs. << Your First and Last Names >> Stay, as well as accommodation, round trip air transportation, and full medical insurance coverage.

Therefore, I kindly ask to issue Mr./ Mrs. << Your First and Last Names >> << type (e.g. Business 1year, multi-entry>> visa at your earliest convenience. Thank you for your assistance. Please contact me should you have any questions.

Sincerely,

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<<Supervisor's signature>> <<Supervisor's Name and Last Name
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<<Title>>

<< Phone Number>>