

#### 1625 K Street NW Suite 750 Washington DC 20006 Tel: 888 838 4867 ♦ Email: <u>TRAVCOA@TravelDocs.com</u>

Visa requirements shown below are for U.S. CITIZENS ONLY. Nationals of all other countries please contact Pinnacle Travel Document Systems directly for specific requirements associated with your itinerary.

KAVCO World Leader in Luxury Travel

## Exquisite Mozambique

| Forms | Photos | 1 – Per  | rsons - 2 | Deadline                           | Expedite Fee<br>Per Person |  |
|-------|--------|----------|-----------|------------------------------------|----------------------------|--|
| 1     | 2      | \$164.00 | \$299.00  | 30 days prior<br>to your departure | \$40.00                    |  |
|       | 1      |          |           |                                    | 30 days prior              |  |

Fees shown above include all necessary consular and service fees as well as the cost to return your passport(s) to you from our offices via FedEx within the continental U.S. (Please add \$29.00 to cover extra shipping costs for addresses in Alaska, Hawaii, or Canada.) We strongly suggest that you send your documents to us via FedEx or some other form of traceable overnight courier service.

Please enclose your actual passport along with two (2) photographs and two (1) completed visa application form for Mozambique. Please also enclose two (2) clear photocopies of the vital information page of your passport. Photographs should be recently shot passport-type photos with a clear background approximately 2" x 2" in dimension. (Note that machine or home photographs are not acceptable and photographs must be different than those in your current passport.) Your passport must be valid for a minimum of six (6) months beyond the completion of your international travel and must have at least three (3) blank unused pages available, not including those reserved for amendments and endorsements at the back of your passport. Contact PTDS directly for assistance with renewal of or to add pages to your U.S. passport, as this can easily be done at the same time you apply for your visas.

Applications must be received in our offices no fewer than 30 days prior to your departure from your shipping address. (Please do not send your documents more than 60 days prior to the departure of your tour due to limited validity of the visa for Mozambique.) Documents received after the deadline will be subject to the *per person* expediting fee shown above. Special requests for passports to be expedited due to other travel plans prior to your tour departure may also require expediting fees. Please contact PTDS directly regarding any special processing needs or before submitting documents you expect may be received substantially after the deadline as there may be special requirements and/or additional fees to process your request. It may not be possible to cancel processing of your applications once they have been submitted.

Please note that consular fees, shipping fees and application requirements are subject to change without notice. Check and credit card payment accepted. Credit card payment subject to 3.5% surcharge.





### PLEASE BE CERTAIN TO RETURN THE FOLLOWING TO:

### Pinnacle Travel Document Systems 1625 K Street NW Suite 750 Washington DC 20006

- Your actual passport (Please keep a photocopy for your records.)
- This completed form
- Two (2) photocopies of the vital information page of your passport
- One (1) completed visa application form *per person* for Mozambique
- Two (2) passport-type photographs per person
- Credit or debit card authorization below

|               | PLEASE TYPE                                 | OR PRINT CLEARLY  |
|---------------|---|---|
| Full Name     | (1):  | Full Name (2):  |
| Passport #    | ¢: Exp:/                                    | Passport #: Exp:/ <sub>_Yr</sub> _  |
| Home          |   | Home Tel:   |
| Mailing       |   | Work Tel:   |
| Address:      |   | Email:  |
|               | (FedEx cannot deliver to PO boxes)          | Date of Departure from Home: / / ///  |
| Address       |   | Tour: Mozambique – Independent Journey  |
| For the       |   | Date of Tour: / /<br>Month Day Year   |
| Return of     |   | Special Instructions:   |
| Passport:     |   |   |
| Tel:          |   |   |
|               |   | r to your tour during which you will need your passport<br>available to sign for the return of your passport. |
| l will need   | my passport(s) for other international trav | el from / / / to / / / / / / / / / / / / / / /  |
|               |   | ss from/_/ to/_///  |
|               | ARD AUTHORIZATION: AMEX / VISA / MO         |   |
| Cardholder Na | ime:  | Signature:  |
| Card #:       | CID#  |   |
| TRAVCOA I     | J EM 2014 (MOZAMBIQUE65)70 164/299          | FX29 3PGS VAL6MOS DL30DYS 40.00 3.5%  |
| TE MOZAMI     | BIQUE 60 DAYS                               |   |
| ©2014 Pinn    | acle Travel Document Systems                |   |

# IMPORTANT NOTICE REGARDING PASSPORT PAGES & VALIDITY:

You must have at least three (3) blank unused pages available in your passport for visas and entry/exit stamps. In addition, your passport must be valid for six (6) months beyond the completion of your international travel. If you are a U.S. citizen, and need to renew or add pages to your passport Pinnacle Travel Document Systems can easily assist you with this at the same time your visas are being processed. The total additional fees for these services (including U.S. government expediting fees) are \$222.00 for passport pages and \$250.00 for passport renewals. We can also assist you with expediting first time passport applications.

You will need to complete an application form and a letter of authorization for PTDS and must send your actual passport to us. Specific requirements and the necessary forms are available for download from our Internet site:

> Passport Pages Passport Renewals First Time Passports Second Passports www.Traveldocs.com/PTDSPassports

You may also contact us via email or phone at <u>TRAVCOA@TravelDocs.com</u> or 888-838-4867 and we will send you an instruction kit.

| PEDIDO DE ENTRA<br>REQUEST FOR ENTR   |                          |  |              |                   |                             | RE     | сіво  | Nº               |              |                         |                 |
|---|--------------------------|--|--------------|-------------------|-----------------------------|--------|-------|------------------|--------------|-------------------------|-----------------|
| PREENCHER COM LETRA<br>TO BE FILLED IN LEGIBLE  |                          | RESERVADO AOS SERVICOS:<br>FOR OFFICIAL USE: |              |                   |                             |        |       |                  | VISTO №      |                         |                 |
| UMA ENTRADA<br>Single entry   | $\checkmark$             |  |              |                   |                             |        |       |                  |              |                         | TA DE EMISSAO   |
| DUPLAS ENTRADAS<br>Double entry   |                          |  |              |                   |                             |        |       |                  |              |                         | VALIDADE        |
| MULTIPLAS ENTRADAS<br>Multiple entries  |                          |  |              |                   |                             |        |       |                  |              |                         |                 |
| APELIDO<br>Surname DOE NOME COMPLETO<br>Full name JONATHAN BON  |                          |  |              |                   |                             |        | IHAM  |                  |              |                         |                 |
| NOME DE SOLTEIRA<br>Maiden name MARRIE  | DFE                      | MALES  |              |                   | OCAL D<br>and place of      |        | h     |                  | GELE         | S, CA                   | USA             |
| DATA DE NASCIMENTO<br>Date of birth<br>13 MAR 1961  |                          | SEXO<br>Sex<br>M                             |              |                   | DO CIVI<br>I status<br>M    |        | RIED  |                  | NA           | <b>CION</b><br>ionality | alidade<br>USA  |
| PASSAPORTE №<br>Passport № 0123456789   | Date of                  | <b>DE EM</b> I<br>issue<br>/. <b>05</b> /    |              |                   | Validad<br>Validity<br>/16/ | \<br>\ | ./ 20 | 15.              | NA<br>P.te   | CION<br>nation          | ALIDADE DO P.te |
| PROFISSAO/OCUPACAO<br>Profession/Occupation EN<br>INSTITUICAO, ORGANIZAC,<br>Institution, organization or firm yo         |                          |  |              | IDE TRA           | CARGO<br>Position<br>BALHA  | you ł  | nold  | M                |              |                         |                 |
| ENDERECO DA RESIDENCIA<br>Address of the permanent resident<br>ESTEVE ALGUMA VEZ EM N<br>Have you ever before been in Moz | PERM<br>ce               | 1BIQUE                                       | 12:          | 34 MAI            | N STRI                      | ET     | , AN) | WHE<br>NAO<br>No | RE C         | A 987<br>]              | 765             |
| JA FOI RESIDENTE EM MOC<br>Have you ever been a resident in N   | C <b>AMBIO</b><br>Mozamb | QUE ?<br>ique ?                              |              |                   | <b>SIM</b><br>Yes           |        |       | NAO<br>No        | $\checkmark$ |                         |                 |
| PORQUE SAIU DE MOCAMB<br>Why did you leave Mozambique a<br>LEAVE BLANK UNLESS   | ?                        | Da   | ate of e     |                   | }                           |        |       |                  | JZAM         |                         | JE              |
| INDIQUE AS INSTUICOES E Mention the institutions and firms  |                          |  |              |                   | LIGADO<br>LEA               | VEI    | BLAN  | K UN             | LESS         | PAS                     | T RESIDENT      |
| O PREENCHIMENTO IN  |                          |  | OU<br>LING I | INDEFI<br>N OF TH | ERIMEN                      | то     |       |                  |              |                         |                 |

| DETALHE OS MOTI<br>In detail give reasons for  | VOS DA ENTRAD<br>r your entry in Moza        | A EM M<br>Imbique | OCAMBIQUE  | TOURIS  | M-PREPA         | ID TO     | UR                  |                                |  |  |
|--|--|-------------------|------------|---|-----------------|-----------|---------------------|--------------------------------|--|--|
| <b>TEMPO DE ESTADA</b><br>Length of stay in Mozar  | Date of entry                                |                   |            | DATA DE SAIDA<br>Date of exit<br>PER YOUR, ITIN             |                 |           |                     |                                |  |  |
| FRONTEIRA DE ENT<br>Entry border   | FRONTEIRA DE SAIDA<br>Exit border VILANCULOS |                   |            |   |                 |           |                     |                                |  |  |
| ENDE   | RECO DA HOSPE                                | DAGEN             | I EM MOCAM | BIQUE – Ad  | dress of reside | ence in N | 1øzambiq            | ue                             |  |  |
| PROVINCIA DISTRITO CIDA<br>Province District Ci<br>INHAMBANE N/A BENGUE  |  |                   |            | RRA ISL. N/A  |                 |           |                     | CASA №<br>House №<br>URA HOTEL |  |  |
| FAMILIARES/AMIGOS RESIDEN   NOME COMPLETO NAG   Full name NAG   AS APPLICABLE Image: Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2">Colspan="2"Colspa |  |                   | DNALIDADE  | MBIQUE – Rélatives, friends liv   PARENTESCO   Relationship |                 |           | ENDERECO<br>Address |                                |  |  |
|  |  |                   |            |   |                 |           |                     |                                |  |  |
| DATA<br>Date<br>}  |  |                   |            |   |                 |           |                     |                                |  |  |
| ASSINATURA RECO  |  |                   |            |   |                 |           |                     |                                |  |  |
| RESERVADO AOS SERVICOS<br>For official use   |  |                   |            |   |                 |           |                     | DATA DE RECEPCAO               |  |  |
|  | DATA DE ENTREGA                              |                   |            |   |                 |           |                     |                                |  |  |

| PEDIDO DE ENTR<br>REQUEST FOR ENT   |   |                            |               |                    | RECIBO №  |                     |                            |  |  |
|---|---|----------------------------|---------------|--------------------|-----------|---------------------|----------------------------|--|--|
| PREENCHER COM LETP<br>TO BE FILLED IN LEGIBL<br>UMA ENTRADA<br>Single entry   |   | _                          |               | O AOS S<br>Al USE: | ERVICOS:  |                     | VISTO №<br>DATA DE EMISSAO |  |  |
| DUPLAS ENTRADAS<br>Double entry   |   |                            |               |                    |           |                     | VALIDADE                   |  |  |
| MULTIPLAS ENTRADAS<br>Multiple entries  |   |                            |               |                    |           |                     |                            |  |  |
| APELIDO<br>Surname  |   | NOME COMPLETO<br>Full name |               |                    |           |                     |                            |  |  |
| NOME DE SOLTEIRA PAIS E LOCAL DE NASCIMENTO   Maiden name Country and place of birth                                  |   |                            |               |                    |           |                     |                            |  |  |
| DATA DE NASCIMENTO<br>Date of birth   | SEXC<br>Sex   | )                          |               |                    |           |                     | ACIONALIDADE<br>tionality  |  |  |
| PASSAPORTE №<br>Passport №  | DATA DE EM<br>Date of issue   |                            | Validity P.te |                    |           | cionality cionality |                            |  |  |
| PROFISSAO/OCUPACAO CARGO QUE OCUPA   Profession/Occupation Position you hold  |   |                            |               |                    |           |                     |                            |  |  |
|   | INSTITUICAO, ORGANIZACAO OU EMPRESA ONDE TRABALHA<br>Institution, organization or firm you work |                            |               |                    |           |                     |                            |  |  |
| ENDERECO DA RESIDENCI<br>Address of the permanent reside  |   | TE                         |               |                    |           |                     |                            |  |  |
| ESTEVE ALGUMA VEZ EM<br>Have you ever before been in M  |   | Е?                         |               | <b>SIM</b><br>Yes  | NAO<br>No |                     | ]                          |  |  |
| JA FOI RESIDENTE EM MOCAMBIQUE ? SIM NAO   Have you ever been a resident in Mozambique ? Yes No                       |   |                            |               |                    |           |                     |                            |  |  |
| PORQUE SAIU DE MOCAMBIQUE ?   DATA DE SAIDA     Why did you leave Mozambique ?   Date of exit   }//                   |   |                            |               |                    |           |                     |                            |  |  |
| INDIQUE AS INSTUICOES E EMPRESAS A QUE ESTEVE LIGADO<br>Mention the institutions and firms to which you were attached |   |                            |               |                    |           |                     |                            |  |  |
| O PREENCHIMENTO INCORRECTO OU INCOMPLETO IMPLICA RESPOSTA TARDIA, DEVOLUCAO<br>OU INDEFERIMENTO                       |   |                            |               |                    |           |                     |                            |  |  |
| INCOMPLETE OR INCORRECT FILLING IN OF THIS FORM MAY RESULT IN DELAY DEVOLUTION<br>OR REJECTION                        |   |                            |               |                    |           |                     |                            |  |  |

| DETALHE OS MOTI<br>In detail give reasons for     |  |               | IOCAMBIQUE<br>TOURISM - |                            | TOUR                          |   |         |                    |  |
|---|--|---------------|-------------------------|----------------------------|-------------------------------|---|---------|--------------------|--|
|   |  |               |                         |                            |                               |   |         |                    |  |
| <b>TEMPO DE ESTADA</b><br>Length of stay in Mozar | Date of entry D                              |               |                         | Date                       | DATA DE SAIDA<br>Date of exit |   |         |                    |  |
| FRONTEIRA DE ENT<br>Entry border                  | FRONTEIRA DE SAIDA<br>Exit border VILANCULOS |               |                         |                            |                               |   |         |                    |  |
| ENDE  | RECO DA HOSPE                                | EDAGEN        | M EM MOCAM              | BIQUE – Ad                 | dress of r                    | esidence ir                                 | n Moza  | mbique             |  |
| PROVINCIA<br>Province<br>INHAMBANE                | CIDA<br>Cit<br>BENGUEF                       | Avenue/street |                         |                            |                               | CASA №<br><sub>House №</sub><br>AZURA HOTEL |         |                    |  |
| FAMILIA   | RES/AMIGOS RES                               | SIDENT        | TES EM MOCA             | MBIQUE – R                 | Relatives,                    | friends livi                                | ng in N | Iozambique         |  |
|   | NOME COMPLETO                                |               |                         | PARENTESCO<br>Relationship |                               |   |         | NDERECO<br>Address |  |
|   |  |               |                         |                            |                               |   |         |                    |  |
|   |  |               |                         |                            |                               |   |         |                    |  |
| RESERVADO AOS SELOS<br>Reserved for stamps        |  |               |                         |                            |                               |   |         |                    |  |
| DATA<br>Date }//                                  |  |               |                         |                            |                               |   |         |                    |  |
| ASSINATURA RECO<br>№                              |  |               |                         |                            |                               |   |         |                    |  |
| RESERVADO AOS SERVICOS<br>For official use        |  |               |                         |                            |                               |   |         | ATA DE RECEPCAO    |  |
|   |  |               |                         |                            |                               |   |         |                    |  |
|   | DATA DE ENTREC                               |               |                         |                            |                               |   |         |                    |  |
|   |  |               |                         |                            |                               |   |         |                    |  |