

24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



Cyprus Tourist visa Application

| | Please enter your contact information |
|-----------|---|
| Name: | |
| Email: | |
| Tel: | Mobile: |
| The late | est date you need your passport returned in time for your travel: |
| lease no | te that you need to attend the visa application center in order to be able to submit the visa application. |
| A visa ma | be issued for multiple entries at the sole discretion of the embassy. |
| ~ | Cyprus tourist visa checklist |
| | Filled out and signed Cyprus tourist visa application form. The form is enclosed. |
| visa-p | Passport. A valid passport for at least three months after departure from the territory of the Republic of Cyprus with a blank age. |
| | Passport Photo. One recent photograph per person endorsed on passport. |
| | Payment. Credit Card Authorization form, Postal Order payable to VisaHQ.co.uk. |
| | Return mailer. Prepaid self-addressed return label or payment for Royal Mail. |
| for at | Proof of status. Original and copy of UK Residence permit, endorsed in the passport or issued as a Biometrics card, must be valid least one month beyond the return date of the trip to Cyprus; C type visitor visa (see here) is also accepted. |
| | Travel medical insurance. Which must be valid for the whole duration of the travel. The minimum amount of the insurance age is 30 000 euros and it must be valid in the whole Schengen area or worldwide. The travel medical insurance must be acquired an insurance company approved by the Schengen countries. |



24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



| J p | roof | οf | emp | lovm | ent |
|-----|------|----|-------|------|------|
| - | 1001 | vı | CILID | | ıenı |

- **Employer letter** (original scanned copy): recent (less than 1 month old), signed, headed letter (addressed to the Mission, name and position of the signee and confirming applicant's employment) and last month's Payslip.
- **Student letter** (original scanned copy): recent (less than 1 month old), signed, UK school/college/university letter (addressed to the Mission, name and position of the signee and confirming applicant's enrolment)
- **Self-Employment letter** (original): recent (less than 1 month old), signed, headed letter (addressed to the Mission, name and position of the signee and confirming applicant's self-employment) and obtained from (if applicable):
 - applicant's accountant: when applicant's company's accountancy is done by an external/independent accountant
 - solicitor: when applicant's company has been registered by a solicitor
 - bank manager: when applicant's company has a business bank account
 - Companies House: Certificate of Incorporation received upon registering business: if applicant's name is not mentioned on certificate, then additional proof demonstrating connection applicant company should be provided
 - HMRC letter

· Unemployed/retired:

- Receiving Benefits: recent original letter obtained from local Jobcentre or Pension Service
- Housewife/man (only applicable to married couples): applicant's may be sponsored by their spouse/registered partner; in these cases the following needs to be provided:
 - 1. marriage certificate (original + copy): when this document was issued outside the EU and is not in English, Greek or Turkish, then it should be translated by a certified translator in the UK
 - 2. spouse/registered partner's passport (original + copy)
 - 3. spouse/registered partner's proof of occupation (as in B.1.a, b or c)
 - 4. spouse/registered partner's proof of funds
 - 5. spouse/registered partner's cover letter (signed & dated) confirming sponsorship

| | Proof of sufficient funds. • Latest 3 months UK bank statements showing applicant's name, address and an end balance dated |
|------|---|
| with | nin the last month on the visa application submission date; balance needs to show a minimum amount of £ 50.00/day of stay in Cyprus |

- + outstanding accommodation and travel fees (alternatively online bank account printouts are also accepted)
- Travellers' cheques covering the same amount as explained under a.



24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



| | ets: mentioning applicant's name and travel dates to & from Cyprus. Flights are only arriving and departing from either Larnaka or Paphos airports. Flights booked through | | | | | |
|---|---|--|--|--|--|--|
| Ercan airport are not accepted. | | | | | | |
| • When travelling by car: car registration, car insurance | ce, return travel tickets (ferry) mentioning the car's registration number and driver's | | | | | |
| riving licence. If applicant is not the driver, then driver's cover letter (signed & dated) confirming joint travel with applicant and travel | | | | | | |
| dates need to be provided too. | | | | | | |
| | aid accommodation must be provided with the application and the accommodation ation in North Cyprus will not be accepted unless recognized by the Republic of me, travel dates and accommodation address details. | | | | | |
| • If the applicant's name is not mentioned on the acco | ommodation reservation, then a joint travel confirmation letter, signed and dated by | | | | | |
| the person whose name is the confirmed booking, mu | st also be provided along with a photocopy of that same person's passport/ID card + | | | | | |
| passport signature page, if signature is not on passport | rt's bio page. | | | | | |
| | n a list with the names of the group members will also be required; alternatively the | | | | | |
| group members their names may also be mentioned of | | | | | | |
| | | | | | | |
| Additional documents. Pay slips may be requ | ired. | | | | | |
| If you wish to prepay return shipping, please add the sh | | | | | | |
| Royal Mail Special Delivery by 1 pm (Next Day) - from | Name: | | | | | |
| Same day Central London courier delivery - from £15 | Company: | | | | | |
| $\prod_{\pm 25}^{ m Royal \; Mail \; Special \; Delivery \; by \; 9 \; am \; (Next \; Day) \; - \; from \;$ | Address: | | | | | |
| Royal Mail Special Delivery Saturday Guarantee before 1pm (Next Day) - from £25 | City: | | | | | |
| Same Day Outside Central London - from £30 | Postal code: | | | | | |
| UK Next Day courier delivery - from £35 | | | | | | |
| Royal Mail Special Delivery Saturday Guarantee before 9am (Next Day) - from £35 | | | | | | |
| VHQ same day Central London - from £40 | | | | | | |
| Airport Service MEET&GREET - from £75 | Airport Service MEET&GREET - from £75 | | | | | |
| Airport Delivery HEATHROW - from £80 | | | | | | |
| Airport Delivery GATWICK - from £90 | | | | | | |
| Prepaid self addressed mailer - £0 | | | | | | |
| Local pick up in London - £0 | | | | | | |
| | | | | | | |



24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



NOTE: For minors (aged under eighteen years): -A certified written consent from both parents and/or legal guardians. -A copy of each parent's/guardian's passport and the child's original birth certificate which must include the parents details or the necessary court documentation. -If the parents reside in the UK they should be present during the application.

Holders of the following documents do not need a visa to enter Cyprus:

1. Schengen Visa rated for two or multiple entries. 2. Schengen Long Stay Visa. 3. Residence permit issued by a Schengen Country. 4. Romanian, Croatian and Bulgarian Visa, Valid for two or multiple entries. 5. Residence permit issued by Romania, Bulgaria and Croatia.



24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



Cyprus Tourist visa Application

| Туре | of visa | Validity | Processing time | Embassy fee | Service fee | VAT | Total |
|------|----------|---------------|----------------------------------|--------------------|-------------|--------|---------|
| Sing | le Entry | up to 90 days | 7-10 work. days after appointmen | £104.00 | £180.00 | £36.00 | £320.00 |

This order is subject to Terms of Service, posted on VisaHQ website.

All fees and requirements may change without notice.



24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



Credit card authorization form

By signing this form i accept VisaHQ.co.uk Terms of Service and authorize to charge my credit card for the amount of ${\bf f}$

| Name on the Credit Card: | | | | | | |
|------------------------------|------------------------------|------|--|--|--|--|
| Credit card number: | - | - | | | | |
| Exp. date: | 1 | CVC: | | | | |
| Credit Card Billing Address: | Credit Card Billing Address: | | | | | |
| | | | | | | |
| Signature: | | | | | | |
| | | | | | | |
| Comments: | | | | | | |

Thank you! We accept all major credit cards.

















Application for Cyprus Visa This application form is free

Stamp Embassy Or Consulate

Family members of EU, EEA or CH citizens or of UK nationals who are Withdrawal Agreement beneficiaries shall not fill in fields no 21, 22, 30, 31 and 32 (marked with *)

Fields 1-3 shall be filled in in accordance with the data in the travel document

| 1. Surname (Family nan | FOR OFFICIAL USE ONLY | | |
|--|--|--|--|
| 2. Surname at birth (For | Date of application: | | |
| | | | Application number: |
| 3. First name (s) (Given | name (s): | | |
| 4. Date of birth | 5. Place of birth: | 7. Current nationality: | Application lodged at: |
| (day-month - year): | 6. Country of birth: | | □ Embassy/consulate |
| | | Nationality at birth (if different): | □ Service provider□ Commercial intermediary |
| | | Other nationalities: | □ Border (Name): |
| | | Other nationalities. | □ Other: |
| 8. Sex: | 9. Civil status: | | File handled by: |
| □ Male □ Female | ☐ Single ☐ Married ☐ Registered ☐ Widow(er) ☐ Other (please spec | Supporting documents: Travel documents Means of subsistence Invitation | |
| 10. Parental authority (i different from applic | ☐ TMI☐ Means of transport☐ Other: | | |
| | Visa decision: □ Refused | | |
| 11. National identity nur | □ Issued: □ A □ C | | |
| 12. Type of travel docun | □ LTV □ Valid: | | |
| □ Ordinary passport □ Official passport | From: Until: | | |
| □ Other travel docur | Number of entries: □ 1 □ 2 □ Mult | | |
| | | | Number of days: |

| 13. Number of travel document: | 14. Date of issue: | 15 | Valid until: 16. Issued by (country): | | 16. Issued by (country): | | |
|---|---|------|---------------------------------------|--------|---------------------------------|--|--|
| 17. Personal data of the family member who is an EU, EEA or CH citizen or an UK national who is a Withdrawal Agreement beneficiary, if applicable: | | | | | | | |
| Surname (Family name): First name (s) (Given name (s)): | | | | | | | |
| Date of birth (day-month-year) | : Nationality: | | Number of tra | ivel | document or ID card: | | |
| beneficiary, if applicable: | | | | al w | rho is a Withdrawal Agreement | | |
| □ spouse □ child □ grandchi □ Registered Partnership □ o | lld □ dependent ascer ther | ıdan | at | | | | |
| 19. Applicant's home address a | nd e-mail address: | | | Tele | phone no.: | | |
| 20. Residence in a country other | 20. Residence in a country other than the country of current nationality: | | | | | | |
| □ No □ Yes. Residence permit or equivalent | | | | | | | |
| *21. Current ocupation: | | | | | | | |
| *22. Employer and employer's establishment: | address and telephone | nun | nber. For studen | ıts, 1 | name and address of educational | | |
| 23. Purpose(s) of journey: | | | | | | | |
| □ Tourism □ Business □ Visiting family or friends □ Cultural □ Sports □ Official visit □ Medical reason □ Study □ Airport transit □ Other (please specify): | | | | | | | |
| 24. Additional information on purpose of stay: | | | | | | | |
| 25. Member State of main destination (and other Member States of destination, if applicable): 26. Member State of first entry: | | | | | | | |
| 27. Number of entries requested: | | | | | | | |
| □ Single entry □ T | wo entries | Mul | tiple entries | | | | |
| Intended date of arrival of the Intended date of departure from | | | | | ed stay: | | |

| 28. Fingerprints collected previously □ No □ Yes | for the purpose of applying for a Schengen | visa: | | | | |
|---|--|---------|----------------------------------|--|--|--|
| Date, if known | | | | | | |
| 29. Entry permit for the final country | | | | | | |
| issued byv | alid from until | •••••• | ••••••• | | | |
| * 30. Surname and first name of the or temporary accommodation(s) in t | inviting person(s) in the Republic of Cyprus he Republic of Cyprus: | s. If n | oot applicable, name of hotel(s) | | | |
| Address and e-mail address of inviting person(s)/hotel(s) temporary accommodation(s): | | | | | | |
| *31. Name and address of inviting co | *31. Name and address of inviting company/organization: | | | | | |
| Surname, first name, address, telephone no, and e-mail address of contact person in company/organisation: Telephone no. of company/organisation: | | | | | | |
| *32. Cost of travelling and living dur | ring the applicant's stay is covered: | | | | | |
| □ by the applicant himself/herself □ by a sponsor (host, company, organisation), please specify: □ referres to in field 30 or 31 □ other (please specify) | | | | | | |
| □ Cash □ Traveller's cheques | Cash Means of support: | | | | | |
| □ Credit card | □ Credit card □ Cash | | | | | |
| □ Pre-paid accomodation | ☐ Accommodation provided | | | | | |
| □ Pre-paid transport□ Other (please specify): | ☐ All expenses covered during the stay ☐ Pre-paid transport | | | | | |
| U Omer (picase specify). | | | | | | |
| | | | | | | |

I am aware that the visa fee is not refunded if the visa is refused.

Applicable in case a multiple-entry visa is applied for:

I am aware of the need to have an adequate travel medical insurance for my first stay and any subsequent visits to the territory of Member States.

I am aware of and consent to the following: the collection of the data required by this application form and the taking of my photograph and, if applicable, the taking of fingerprints, are mandatory for the examination of the application; and any personal data concerning me which appear on the application form, as well as my fingerprints and my photograph will be supplied to the relevant authorities of the Member States and processed by those authorities, for the purposes of a decision on my application.

Such data as well as data concerning the decision taken on my application or a decision whether to annul, revoke or extend a visa issued will be entered into, and stored in the Visa Information System (VIS) for a maximum period of five years, during which it will be accessible to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the Member States, immigration and asylum authorities in the Member States for the purposes of verifying whether the conditions for the legal entry into, stay and residence on the territory of the Member States are fulfilled, of identifying persons who do not or who no longer fulfil these conditions, of examining an asylum application and of determining responsibility for such examination. Under certain conditions the data will be also available to designated authorities of the Member States and to Europol for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences. The authority of Cyprus responsible for processing the data is: Ministry of Foreign Affairs, Presidential Palace Ave., 1447, Nicosia, Tel. +357 22651000, fax +357 22661881, www.mfa.gov.cy.

I am aware that I have the right to obtain, in any of the Member States, notification of the data relating to me recorded in the VIS and of the Member State which transmitted the data, and to request that data relating to me which are inaccurate be corrected and that data relating to me processed unlawfully be deleted. At my express request, the authority examining my application will inform me of the manner in which I may exercise my right to check the personal data concerning me and have them corrected or deleted, including the related remedies according to the national law of the Member State concerned. The national supervisory authority is Data Protection Authority in Cyprus, Iasonos str. 1, 1082, Nicosia, tel. +357 22818456, fax +357 22304565, e-mail: commissioner@dataprotection.gov.cy (dpo@mfa.gov.cy) will hear claims concerning the protection of personal data.

I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that any false statements will lead to my application being rejected or to the annulment of a visa already granted and may also render me liable to prosecution under the law of the Member State which deals with the application.

I undertake to leave the territory of the Member States before the expiry of the visa, if granted. I have been informed that possession of a visa is only one of the prerequisites for entry into the European territory of the Member States. The mere fact that a visa has been granted to me does not mean that I will be entitled to compensation if I fail to comply with the relevant provisions of Article 6(1) of Regulation (EU) No 2016/399 (Schengen Borders Code) and I am therefore refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Member States.

| Place and date: | Signature (signature of parental authority/legal guardian, if applicable): |
|-----------------|---|
| | |
| | |
| | |
| | |