

24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



Netherlands Tourist visa Application

Ţ	Please enter your contact information
Name	:
Email:	
Tel:	Mobile:
The la	test date you need your passport returned in time for your travel:
	plying for a Schengen visa please select the destination you will be staying in for the lengthiest time as you will be to submit an application to the consulate of the country you will be staying in for the longest duration.
Please n visa app	ote that you need to attend the visa application center to provide your fingerprints in order to be able to submit the lication.
mportar	nt : From 20 November 2015 every applicant aged 12 years and over must attend a biometrics appointment (10-digit finger scans and otograph to be taken) when applying for a visa for Netherlands.
equiren our pas Jpon plac	cing your order, our visa specialist will contact you directly to talk through the process in more detail, determine if biometrics are
equired	and if so, to arrange with you the most convenient time for you to attend the appointment at the Visa Application Centre. Netherlands tourist visa checklist
	Filled out and signed Netherlands tourist visa application form. The form is enclosed.
page	Original, signed passport. Passport must have at least 3 months remaining validity on the date of travel and have at least 2 visa clear of any markings.
back	Passport-type photograph: 2 recent (not older than 3 months), passport-size, UK standard, colour photo with white or grey ground.
	Payment. Credit Card Authorization form, Postal Order payable to VisaHQ.co.uk.
	Return mailer. Prepaid self-addressed return label or payment for Royal Mail.



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Proof of Status. Original ILR card or other proof of resident status in the UK. this should be valid for more than 6 months after vour return from Netherlands.
Itinerary. Copy of itinerary showing exact dates of travel from airline or travel agent. Please note that the number of entries on your visa will be based upon your itinerary.
Employment Letter. An original letter from your employer/school (on business letterhead, with contact details), stating that a leave of absence has been granted and that you will be returning to your current job. The Employment Letter must be addressed to
Netherlands High Commission If you are self-employed, include a copy of your business license and tax return. If you are retired please submit proof of your retirement fund.
Hotel Reservations. Copy of confirmed hotel reservations including name of the applicant, name and address of the hotel, duration of stay.
Invitation Letter. Copy of an invitation letter from family or friends in Netherlands and a copy of their passport and visa.
Payslips. Originals and copies of the last three months payslips or salary attestation.
Additional Documents for Children. - Original birth certificate showing the names of both parents
- A letter from child's school confirming current attendance or a letter from their GP if the child is not yet of the school going age
- The written consent of both parents for the child to travel or a sworn affidavit of guardianship/ or original court order in the case of sole guardianship
- Original (or certified copies) photo ID for both parents, as named on the birth certificate, which includes their signatures.
Bank Statement. Copies of bank statements from the past 3 months.
Health Insurance. Proof of health insurance covering international travel on the Schengen territory. This insurance must be valid for the whole of this territory and the whole of the stay. The minimum cover is 30,000 EUR.



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Visa applications should be submitted for a maximum of 6 months, and no later than 15 days, before the trip.



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Type of visa	Validity	Processing time	Embassy fee	Service fee	VAT	Total
Single/Multiple entry	up to 90 days	10-15 bus. days after appoint.	£146.60	£160.00	£32.00	£338.60

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

All fees and requirements may change without notice.



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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 ${\bf f}$

No constant the Constitutional		
Name on the Credit Card:		
Credit card number:	_	-
Exp. date:	1	CVC:
Credit Card Billing Address:		
Signature:		
Comments:		

Thank you! We accept all major credit cards.















Harmonised application form

Application for Schengen Visa

This application form is free



Family members of EU, EEA or CH citizens 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 name)	FOR OFFICIAL USE ONLY			
2.	Surname at birth (Forme	Date of application:			
3.	First name(s) (Given name	ne(s)):			Application number:
4.	Date of birth (day-month-year):	5. Place of b6. Country c		7. Current nationality: Nationality at birth, if different: I-l Other nationalities: [-]	Application lodged at: Embassy/consulate Service provider Commercial intermediary Border (Name):
8.	Sex: [-] Vale [-] Female [-] Single [-] Married [-] Registered partnership [-] Separated [:] Divorced [-] Widow(er) [-] Other (please specify)				Supporting documents: Travel document Means of subsistence Invitation TMI Means of transport Other:
10.	Parental authority (in cast different from applicant?	Visa decision: Refused Issued: A C LTV			
11.	National identity number	☐ Valid: From:			
12.	Type of travel document	Until:			
	[-] Ordinary passport [-] Official passport [-]			rvice passport	Number of entries:
	[-] Other travel documer	nt (please specify	<u>'):</u>		Number of days:

 $^{^{\}rm 1}$ No logo is required for Norway, Iceland, Liechtenstein and Switzerland.

13.	Number of travel document:	14. C	Pate of issue:	15. V	alid until	:	16. Issued by (country):
17.	Personal data of the family member who is an EU, EEA or CH citizen if applicable						
	Surname (Family	/ name):		Fi	irst name	(s) (Gi	ven name(s)):
	Date of birth (day-month-year):	Nationali	ity:			lumber of travel ocument or ID card:
18.	Family relationsh	nip with	an EU, EEA or	CH citiz	zen if app	olicabl	e:
	[-] Spouse [-] Cl [-] Registered pa	hild [-] rtnershi	Grandchild [-] p [-] Other (ple	Dependerase spec	lent ascer	ndant	
19.	Applicant's hom	e addres	s and e-mail ad	dress:	Те	lephor	ne no.:
	(4)		¥ ;				
	-		Y95 (F	82			
20.	Residence in a co	ountry o	ther than the co	untry of	current r	nationa	lity:
	[-] No [-] Yes. Residence permit or equivalent: Residence permit, No:						
	Valid until: -						
* 21	1. Current occupation:						
* 22	22. Employer and employer's address and telephone number. For students, name and address of educational establishment:						
	·						
	199						
23.	Purpose(s) of the journey:						
25.	[-] Tourism [-] Business [-] Visiting family or friends [-] Cultural [-] Sports [-] Official visit [-] Medical reasons [-] Study [-] Airport transit [-] Other (please specify):						
24.	Additional infor	mation	on the purpose of	of the sta	ny:		
25.	Member State or destination (and Member States of destination, if applicable):	other	26. Member entry:	State of	first	i I	Ouration of the ntended stay or transit ndicate number of lays:
	1			****			

27.	Number of entries requested:					
	[-] Single entry [-] Two entries [x] Multiple entries					
	Intended date of arrival of the first intended stay in the Schengen area: _ Intended date of departure from the Schengen area after the first intended stay:					
28.	Fingerprints collected previously for the purpose of applying for a Schengen visa: [-] No [-] Yes.					
29.	Entry permit for the final country of destination, where a	applicable:				
* 30	Surname and first name of the inviting person(s) in the Memporary accommodation(s) in the Member State(s):	Member State(s). If not applicable, name of hotel(s) or				
	Alaman					
	Address and e-mail address of inviting person(s)/hotel (s)/temporary accommodation(s):	Telephone no.:				
	, _ _					
* 31	. Name and address of inviting company/organisation:					
	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 during the applicant's stay	is covered:				
	[-] By the applicant himself/herself	[-] By a sponsor (host, company, organisation), please specify:				
	Means of support: [-] Cash [-] Traveller's cheques [-] Credit card [-] Pre-paid accommodation [-] Pre-paid transport [-] Other (please specify):	Means of support: [-] Cash [x] Accommodation provided [x] All expenses covered during the stay [-] Pre-paid transport [-] Other (please 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 the Member State responsible for processing the data is: Ministry of Foreign Affairs, Consular Affairs and Visa Policy Department (DCV), Postbus 20061, 2500 EB DEN HAAG.

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 of that Member State [Autoriteit Persoonsgegevens, Postbus 93374, 2509 AJ DEN HAAG] 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):