

24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



## **Netherlands Tourist visa Application**

|           | Please enter your contact information   |
|-----------|---|
| Name:     |   |
| Email:    |   |
| Tel:      | Mobile:   |
| The lat   | 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.                                |
|           | ote that you need to attend the visa application center to provide your fingerprints in order to be able to submit the  |
| -         | <b>t</b> : From 20 November 2015 every applicant aged 12 years and over must attend a biometrics appointment (10-digit finger scans and stograph to be taken) when applying for a visa for Netherlands.   |
|           | s able to assist the client with checking and reviewing application form to ensure accuracy and meeting with the<br>ents of the visa process, also we will assist you personally during the appointment not to queue up, and will collect<br>sport.             |
| Jpon plac | ing your order, our visa specialist will contact you directly to talk through the process in more detail, determine if biometrics are 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      | <b>Original, signed passport.</b> Passport must have at least 3 months remaining validity on the date of travel and have at least 2 visa clear of any markings.   |
| backo     | <b>Passport-type photograph:</b> 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.   |



24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



| <b>Proof of Status.</b> 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.  |
| <b>Employment Letter.</b> 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.  |



24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



| Royal Mail Special Delivery by 1 pm (Next Day) - from                              | Name:        |
|--|--------------|
| Same day Central London courier delivery - from £15                                | Company:     |
| Royal Mail Special Delivery by 9 am (Next Day) - from $£25$                        | Address:     |
| Royal Mail Special Delivery Saturday Guarantee<br>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 Delivery HEATHROW - from £80   |              |
| Airport Delivery GATWICK - from £90  |              |
| Prepaid self addressed mailer - £0   |              |
| Local pick up in London - £0   |              |

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



24 Tufton Street London SW1P 3RB

Tel: 4420 4577 3307



## **Netherlands Tourist visa Application**

| 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.



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: |   |      |
|                              |   |      |
| 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<br>(day-month-year):                    | <ul><li>5. Place of b</li><li>6. Country c</li></ul> |   | 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:<br>[.] <b>√Iale</b> [-] Female                   |  | tus:  e [-] Married stered partnership rated [:] Divorced sw(er) (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:<br>From:                                    |   |   |   |
| 12. | Type of travel document                               | Until:   |   |   |   |
|     | [-] Ordinary passport<br>[-] Official passport [-]    | Number of entries:                                   |   |   |   |
|     | [-] Other travel documer                              | Number of days:                                      |   |   |   |
|     |   |  |   |   |   |

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

| 13.  | Number of travel document:   | 14. D                | 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): Firs  |                      |                                 |                  | irst name  | (s) (Gi | ven name(s)):   |
|      | Date of birth (day-month-year  | ):                   | Nationali                       | ity:             |            |         | lumber of travel<br>ocument or ID card:                         |
| 18.  | Family relationsh  | nip with             | an EU, EEA or                   | CH citiz         | zen if app | olicabl | e:  |
|      | [-] Spouse [-] Cl<br>[-] Registered pa   | hild [-]<br>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)  |                      | ±#.                             |                  |            |         |   |
|      |  |                      |                                 |                  |            |         |   |
|      |  |                      |                                 |                  |            |         |   |
|      | -  |                      | Yab 19 ***                      | 82               |            |         |   |
| 20.  | 0. Residence in a country other than the country of current nationality:   |                      |                                 |                  |            |         |   |
|      | [-] No [-] Yes. Residence permit or equivalent: Residence permit, No:  |                      |                                 |                  |            |         |   |
|      | Valid until: -   |                      |                                 |                  |            |         |   |
|      |  |                      |                                 |                  |            |         |   |
| * 21 | 21. Current occupation:  |                      |                                 |                  |            |         |   |
|      |  |                      |                                 |                  |            |         |   |
| * 22 | 22. Employer and employer's address and telephone number. For students, name and address of educational establishment:   |                      |                                 |                  |            |         |   |
|      |  |                      |                                 |                  |            |         |   |
|      | les.   |                      |                                 |                  |            |         |   |
|      | 20   | 200                  |                                 |                  |            |         |   |
| 23.  | 3. 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<br>destination (and<br>Member States of<br>destination, if<br>applicable):   | other                | 26. Member entry:               | State of         | first      | i<br>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.  | 9. Entry permit for the final country of destination, where 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  |  |  |  |  |
|      | Alexandra v  |  |  |  |  |  |
|      | Address and e-mail address of inviting person(s)/hotel (s)/temporary accommodation(s):   | Telephone no.:   |  |  |  |  |
|      | , _<br>_   |  |  |  |  |  |
| * 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): |
|                 |  |
|                 |  |
|                 |  |