

Tel: 4420 4577 3307



## Saint Pierre Miquelon Tourist visa Application

!	Please enter your contact information
Name:	
Email:	
Tel:	Mobile:
The lat	est date you need your passport returned in time for your travel:
int Pier	rre Miquelon is the territory of France.
	Saint Pierre Miquelon tourist visa checklist
	Filled out and signed Saint Pierre Miquelon tourist visa application form. The form is enclosed.
least :	<b>Original passport and its copy:</b> A signed national passport or official travel document issued less than 10 years ago, valid for at 3 months beyond the validity of the requested visa; The passport must contain two blank 'visa' pages.
upload	<b>Passport Photo:</b> Include a passport style photo, with a white background, taken within the last 6 months. You may also choose to d a photo to your order for us to print. There is a surcharge associated with this service.
	Payment. Credit Card Authorization form, Postal Order payable to VisaHQ.co.uk.
	Return mailer. Prepaid self-addressed return label or payment for Royal Mail.
returr	<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 your n from Saint Pierre Miquelon.
your v	<b>Itinerary.</b> Copy of itinerary showing exact dates of travel from airline or travel agent. Please note that the number of entries on visa will be based upon your itinerary.
	<b>Travel Insurance.</b> Letter on company letterhead from Health Insurance Company indicating the coverage plan for the applicant, fically stating that the applicant will be covered while traveling internationally and indicating the validity of this coverage (with a num medical coverage of GBP 22,000).

VisaHQ.co.uk Ltd., 24 Tufton Street, London SW1P 3RB T: 4420 4577 3307 E: info@visahq.co.uk



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Bank Statement. Copy of a recent bank statement showing proof of sufficient funds (at least GBP 60 per day).

**Employment Letter.** Copy of a letter from your employer on business letterhead, with contact details, stating that a leave of absence has been granted, purpose and duration of the trip, and that you will be returning to your current job. The Employment letter must be addressed to the **High Commission of Saint Pierre Miquelon**. 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. The documents shouldn't be older than 1 month.

**Hotel Reservations.** Copy of confirmed hotel reservations including name of the applicant, name and address of the hotel, duration of stay.

Purpose of Travel/Stay. Reservation confirmation of an organised trip or any other document describing the planned programme.

If you wish to prepay return shipping, please add the shipping fee to the total and provide return address:

Royal Mail Special Delivery by 1 pm (Next Day) - from $f_{\pm 11}$	Name:
Same day Central London courier delivery - from £15	Company:
Royal Mail Special Delivery by 9 am (Next Day) - from $_{\pm 25}$	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 Delivery HEATHROW - from £80	
Airport Delivery GATWICK - from £90	
Prepaid self addressed mailer - £0	
Local pick up in London - £0	



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## Saint Pierre Miquelon Tourist visa Application

Type of visa	Validity	Processing time	Embassy fee	Service fee	VAT	Total
Single entry	up to 90 days	15 business days	£55.00	£120.00	£24.00	£199.00

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 £

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

Comments:







Application for Schengen Visa
This application form is free

PHOTO

For official use only 1. Surname (Family name) (x) Date of application: 2. Surname at birth (Former family name(s)) (x) Visa application number: 3. First name(s) (Given name(s)) (x) Application lodged at Embassy/consulate 5. Place of birth 4. Date of birth (day-month-year) 7. Current nationality Nationality at birth, if different: CAC 6. Country of birth Service provider Commercial intermediary 9. Marital status 8. Sex □ Border ☐ Male ☐ Female □ Single □ Married □ Separated □ Divorced □ Widow(er) □ Other (please specify) Name: □ Other 10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority/legal guardian File handled by: 11. National identity number, where applicable Supporting documents: □ Travel document 12. Type of travel document ☐ Means of subsistence 🗋 Ordinary passport 🗋 Diplomatic passport 🗋 Service passport 🗋 Official passport 🗋 Special passport ☐ Invitation □ Other travel document (please specify) ☐ Means of transport 15. Valid until 13. Number of travel 14. Date of issue 16. Issued by 🗖 TMI document □ Other: Visa decision: 17. Applicant's home address and e-mail address Telephone number(s) □ Refused □ Issued: 18. Residence in a country other than the country of current nationality ΠA 🔲 No ПС LTV \* 19. Current occupation □ Valid From ..... \* 20. Employer and employer's address and telephone number. For students, name and address of educational Until ..... establishment. Number of entries: □ 1 □ 2 □ Multiple 21. Main purpose(s) of the journey: □ Tourism □ Business □ Visiting family or friends □ Cultural □ Sports Number of days: □ Official visit ☐ Medical reasons □ Study □ Transit □ Airport transit □ Other (please specify)

22. Member State(s) of destination	23. Member State of first entry
24. Number of entries requested	25. Duration of the intended stay or transit
<ul> <li>☐ Single entry ☐ Two entries</li> <li>☐ Multiple entries</li> </ul>	Indicate number of days

The fields marked with \* shall not be filled in by family members of EU, EEA or CH citizens (spouse, child or dependent ascendant) while exercising their right to free movement. Family members of EU, EEA or CH citizens shall present documents to prove this relationship and fill in fields No 34 and 35.

 $\left(x\right)$  Fields 1-3 shall be filled in in accordance with the data in the travel document.

26. Schengen visas issued during the past three years					
□ No					
☐ Yes. Date(s) of validity from					
27. Fingerprints collected previously for the purpose of	f applying f	or a Schengen visa			
🗋 No 🔲 Yes					
		Date, if known			
28. Entry permit for the final country of destination, w	where applic	able			
Issued by Valid from	•••••	until			
29. Intended date of arrival in the Schengen area	30. Inten	ded date of departure from the Schengen area			
	* 31. Surname and first name of the inviting person(s) in the Member State(s). If not applicable, name of hotel(s) or temporary accommodation(s) in the Member State(s)				
Address and e-mail address of inviting person(s)/hotel(s)/ accommodation(s)	/temporary	Telephone and telefax			
* 32. Name and address of inviting company/organisat	ion	Telephone and telefax of company/organisa- tion	-		
Surname, first name, address, telephone, telefax, and e-mail address of contact person in company/organisation					
* 33. Cost of travelling and living during the applicant's stay is covered					
□ by the applicant himself/herself	□ by a specif	sponsor (host, company, organisation), please y	-		
Means of support	of support I referred to in field				
□ Cash	🗋 other (please specify				
Traveller's cheques	Means of	support			
Credit card	□ Cash				
Prepaid accommodation	ion 🗌 Accommodation provided				
Prepaid transport		xpenses covered during the stay			
□ Other (please specify) □ Prepaid transport					
□ Other (please specify)					

34. Personal data of the family member who is an EU, EEA or CH citizen				
Surname			me(s)	
Date of birth Nationality			Number of travel document or ID card	
35. Family relationship with an ☐ spouse ☐ child				
36. Place and date	37. Signat guardi		ninors, signature of parental authority/legal	

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 (cf. field No 24):

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 visa application; and any personal data concerning me which appear on the visa 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 visa 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)  $(^1)$  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: [...].

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 State concerned. The national supervisory authority of that Member State [contact details] 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 5(1) of Regulation (EC) No 562/2006 (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 (for minors, signature of parental authority/legal guardian):
( <sup>1</sup> ) In so far as the VIS is operational.	