

BENMAR CUSTOMER REQUEST FORM

PERSONAL DETAILS

Surname & Initials	Address
Title (Mr / Mrs / Ms / Miss)	
Nationality	Telephone

VISA REQUIREMENT

Country	Dates	Purpose of Trip (business / tourism)	Entries (single / double / multi)
	From: / / To: / /		
	From: / / To: / /		
	From: / / To: / /		

TIMESCALE

Please advise (if you are travelling in the meantime) the date you require your passport	
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PASSPORT REQUIREMENT (tick relevant boxes)

<input type="checkbox"/> New or Renewal Standard-size Adult Passport	<input type="checkbox"/> Extension to existing passport
<input type="checkbox"/> New or Renewal Standard-size Child Passport	<input type="checkbox"/> Second Passport <input type="checkbox"/> Standard-size
<input type="checkbox"/> New or Renewal Large-size Adult Passport	<input type="checkbox"/> Second Passport <input type="checkbox"/> Large-size
<input type="checkbox"/> New or Renewal Large-size Child Passport	<input type="checkbox"/> Gender Change
<input type="checkbox"/> Amendment to existing Passport (name / photo)	

RETURN / DELIVERY (tick relevant boxes)

<input type="checkbox"/> Royal Mail Special Delivery Post	<input type="checkbox"/> Airport Delivery to _____
<input type="checkbox"/> Personal Collection from Benmar Office	<input type="checkbox"/> Other Method (please give details):
<input type="checkbox"/> Courier Delivery	

If documents to be delivered to an address other than that shown above, please indicate the address here:

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PAYMENT (Travel Agents & Companies will be invoiced if previously known to us)

Benmar Fee	Delivery Charge	VAT	Embassy Fee	Total Amount
£ : :	£ : :	£ : :	£ : :	£ : :

NB: If enclosing cheque please write name, address and telephone number clearly on reverse of cheque.

CREDIT CARD PAYMENT (or Cheque Enclosed. Please call us if you prefer to pass details by phone.)

Card Type:	<input type="checkbox"/> Visa	<input type="checkbox"/> Visa Debit	<input type="checkbox"/> Master Card	<input type="checkbox"/> Amex *		
Card Number:				Expiry Date:		
Signature:		Date:		Card Security Code **:		

** Chip and Pin requirement last 3 numbers from reverse of card

ENCLOSURES (tick relevant boxes - ***bold underlined items are required for all applications***)

<input type="checkbox"/> <u>Passport(s)</u>	<input type="checkbox"/> Letter of Invitation or Sponsorship	<input type="checkbox"/> Proof of Funds
<input type="checkbox"/> <u>Photograph</u>	<input type="checkbox"/> Evidence of Medical Insurance	<input type="checkbox"/> Other:
<input type="checkbox"/> <u>Cheque or Credit Card Details</u>	<input type="checkbox"/> Vaccination Certificate(s)	
<input type="checkbox"/> <u>Visa or Passport Application Form(s)</u>	<input type="checkbox"/> Evidence of Hotel Booking	

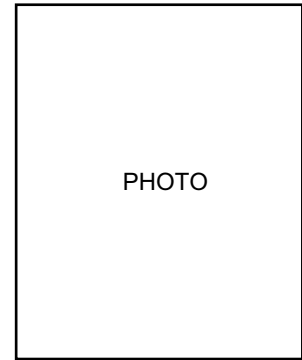
Please send this form, with all relevant supporting documents, by special delivery to:
Benmar Passport & Visa Service Ltd. 14 Buckingham St, London WC2N 6DF

Do not be concerned if your submission is incomplete or incorrect, we will contact you immediately to resolve any issues arising from your application.
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Application for Schengen Visa

This application form is free



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

22. Member State(s) of destination	23. Member State of first entry	
24. Number of entries requested <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input type="checkbox"/> Multiple entries	25. Duration of the intended stay or transit 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.

(x) 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 <input type="checkbox"/> No <input type="checkbox"/> Yes. Date(s) of validity from to		
27. Fingerprints collected previously for the purpose of applying for a Schengen visa <input type="checkbox"/> No <input type="checkbox"/> Yes Date, if known		
28. Entry permit for the final country of destination, where applicable Issued by Valid from until		
29. Intended date of arrival in the Schengen area	30. Intended 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)/temporary accommodation(s)		Telephone and telefax
* 32. Name and address of inviting company/organisation		Telephone and telefax of company/organisation
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		
<input type="checkbox"/> by the applicant himself/herself Means of support <input type="checkbox"/> Cash <input type="checkbox"/> Traveller's cheques <input type="checkbox"/> Credit card <input type="checkbox"/> Prepaid accommodation <input type="checkbox"/> Prepaid transport <input type="checkbox"/> Other (please specify)		<input type="checkbox"/> by a sponsor (host, company, organisation), please specify <input type="checkbox"/> referred to in field 31 or 32 <input type="checkbox"/> other (please specify) Means of support <input type="checkbox"/> Cash <input type="checkbox"/> Accommodation provided <input type="checkbox"/> All expenses covered during the stay <input type="checkbox"/> Prepaid transport <input type="checkbox"/> Other (please specify)

34. Personal data of the family member who is an EU, EEA or CH citizen		
Surname		First name(s)
Date of birth	Nationality	Number of travel document or ID card
35. Family relationship with an EU, EEA or CH citizen <input type="checkbox"/> spouse <input type="checkbox"/> child <input type="checkbox"/> grandchild <input type="checkbox"/> dependent ascendant		
36. Place and date		37. Signature (for minors, signature of parental authority/legal guardian)

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):
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⁽¹⁾ In so far as the VIS is operational.