

EMBASSY OF THE REPUBLIC OF INDONESIA SINGAPORE

TOURIST VISA

VISA APPLICATION FORM

ATTE	NTION Fill out all headings using CAPITA	L LETTERS. Your application shall not be processed in c	ase of error or omission.	esti.		
1.	Full name of applicant (Same as in passport) Place and date of birth	:	Sex M F	Photo		
2.	Nationality Passport/Travel Document Number Place and date of issuance Valid until	:		3.5 x 4.5 cm		
3.	Occupation/Position Name of Firm of employment Address of Firm and telephone number			For official use only: Tgl: H B T T Sponsor: Y T		
4.	Address in Singapore	:		Persetujuan: Ditjenim Y T		
5.	Contact Number Purpose of visit to Indonesia	:		Paspor berlaku lebih dari		
6.	Length of intended stay in Indonesia Port and date of entry into Indonesia Place to be visited in Indonesia	: DAYS MONTHS YEARS : DAYS MONTHS MON	Y	6 bulan: Y T T T T T T T T T T T T T T T T T T		
	Do you have letter of Invitation	:	Yes No	Persyaratan lengkap: Y T		
7.	Name of reference in Indonesia Address of reference/firm Do you have a Visa approval from Indonesia	esia ? :	Yes No	() Petugas Counter		
		;		Telah diberikan Visa		
8.	Has your application for Indonesia visa ever been denied: Have you ever been ordered to leave Indonesia: Have you ever been arrested or convicted of any criminal act: If yes, when: D M Yes No Nomor Visa: Yes No Lamanya diizinkan tinggal					
9.	Other information which will be useful in considering this application: a. Are you in possession of other country's legal and valid travel document: b. Return/Through Ticket/Airline Company: Place and date of issue: Expiration date: D M Y Disetujui / di Indonesia: s.d					
	2. I realize that even of the immigration lso aware : That during my vis a. being engaged b. over staying	n above are true and correct. hough I possess a visa to Indonesia, permission for entry remaination in Indonesia. I to Indonesia I have refrain from.: n any occupation or institution paid or unpaid without a valid permoly with the above mentioned requirements. I am liable to procec	nit ution and expulsion.	Pejabat Imigrasi		
	Signature of Applicant	_/ D	M Y			



EMBASSY OF THE REPUBLIC OF INDONESIA SINGAPORE

VISIT VISA

VISA APPLICATION FORM

ATTENTION Fill out all headings using CAPITAL LETTERS. Your application shall not be processed in case of error or omission.						
1.	Full name of applicant (Same as in passport) Place and date of birth	:		Photo		
2.	Nationality Passport/Travel Document Number Place and date of issuance Valid until			3.5 x 4.5 cm		
3.	Occupation/Position Name of Firm of employment Address of Firm and telephone number			For official use only: Tgl: H		
4.	Address in Singapore	:		Persetujuan:		
5.	Contact Number Purpose of visit to Indonesia			Ditjenim Y T		
6.	Length of intended stay in Indonesia Port and date of entry into Indonesia Place to be visited in Indonesia	DAYS MONTHS :	YEARS DMY	6 bulan: Y T T Cekal: Y T T T T T T T T T T T T T T T T T T		
	Do you have letter of Invitation	:	Yes No	Persyaratan		
7.	Name of reference in Indonesia Address of reference/firm Do you have a Visa approval from Indor	:		lengkap: Y T T T T T T T T T T T T T T T T T T		
	Number of Visa Approval/Authorization	:		Telah diberikan Visa		
8.	Has your application for Indonesia vi Have you ever been ordered to leave In Have you ever been arrested or convict If yes, when: D M Y	Ionesia :	Yes No Yes No Yes No	Index Visa:		
9.	Other information which will be useful a. Are you in possession of other count b. Return/Through Ticket/Airline Composite and date of issue: Expiration date:	ry's legal and valid travel document:	Yes No mber	H		
	by declare that 2. I realize that even of the immigration That during my visi a. being engaged i b. over staying	Pejabat Imigrasi				
	(Signature of Applicant.		D M Y	()		