				OMB No. 1651-0107	
	FEE ST	AMP			
DEPARTMENT OF HOMELAND SECURI	ITY				
APPLICATION FOR WAIVER					
OF PASSPORT AND/OR VISA					
	FILE NU	JMBER			
1. MY NAME IS: (LAST)	(FIRST)		(MIDDLE)		
	(11(31))		(MIDDEE)		
2. MY UNITED STATES DESTINATION IS: (NUMBER	AND STREET, AP	PT. NO., CITY, STATE,	ZIP CODE)		
3. MY PERMANENT ADDRESS ABROAD IS:					
4. THE COUNTRY OF WHICH I AM A CITIZEN, SUBJE	CT OR NATIONA	L IS:			
5. PLACE OF BIRTH			DATE OF BIRTH (MM	I/DD/YYYY):	
6. DATE OF ARRIVAL:	ORT OF ARRIVAL	ARRIVAL:			
7. MANNER OF ARRIVAL (NAME OF VESSEL, AIRLIN	IE, ETC.)				
8. PLACE VISA PREVIOUSLY ISSUED: DA	ΓE: NU	JMBER: CLA	ASSIFICATION:	VALID TO:	
9. PLACE PASSPORT ISSUED: DATE: NUMBER: VALID TO:					
10. THE REASON I AM NOT IN POSSESSION OF	PASSPORT		LOWS: (CONTINUE (ON REVERSE, IF NECESSARY)	
]			,	
DATE OF THIS APPLICATION:					
DATE OF THIS AFFLICATION.	OF THIS APPLICATION: I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT.				
CITY AND STATE:					
		SIGNATURE OF APPLICANT			
					
SIGNATURE OF PERSON PREPARING FORM, IF OTH					
I DECLARE THAT THIS DOCUMENT WAS PREPARED WHICH I HAVE ANY KNOWLEDGE.	BY MEAT THE	REQUEST OF THE AP	PLICANT AND IS BAS	ED ON ALL INFORMATION OF	
SIGNATURE		ADDRESS		DATE	
APPLIC	ANT - DO NOT	WRITE BELOW	THIS LINE		
APPLICATION APPROVED. WAIVER GRANTED				N DISAPPROVED.	
UNDER SECTION 211(b)			DATE		
BY AUTHORITY OF		(DHS)	OF		
UNDER SECTION 212(d)(4)			ACTION		
BY AUTHORITY OF		(DHS)			
			DFO		
ADMITTED AS	UNTIL		OR PD		
NONIMMIGRANT CL			OFFICE		

DHS Form I-193 (06/08)

Fee:

A fee of \$545.00 must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **Do not mail cash. All fees must be submitted in the exact amount.**

If the application is being made in Guam, a check or money order must be payable to the "Treasurer, Guam." If the application is being made in the U.S. Virgin Islands, a check or money order must be payable to the "Commissioner of Finance of the Virgin Islands."

Some filing locations have the capability to accept credit cards. Please inquire with the individual filing location as to their ability to accept credit cards.

All other applicants must make a check or money order payable to **U.S. Customs and Border Protection** or **Department of Homeland Security.** When a check is drawn on the account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If the application is submitted from outside the United States, remittance may be made by a bank international money order or foreign draft which is payable in United States currency, drawn on a financial institution located in the United States and made payable to **U.S. Customs and Border Protection or Department of Homeland Security**.

All personal checks and money orders must be drawn on a bank or other institution located in the United States and be payable in United States currency. Personal checks are accepted subject to collection. An uncollected check will render the application and any document issued pursuant thereto invalid. A charge of \$30.00 will be imposed if a check in payment of a fee is not honored by the financial institution on which it is drawn.

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0107. The estimated average time to complete this application is 10 minutes per respondent. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Information Services Division, 1300 Pennsylvania Avenue, NW, Washington DC 20229.