

SENTRI RENEWAL APPLICATION FORM

INSTRUCTIONS:

1. Please complete one SENTRI application form per person. Complete the address and employment fields for the last five years in full, leaving NO gaps (including when unemployed or student)

2. Make sure you have entered your identity documents data correctly. You may attach clear copies of your identity and citizenship documents if you wish (driver licence, passport, PR card).

3. Send your entire completed package using one of the following methods: FAX application package to (832) 201-9600 OR SAVE application and email to info@passport-visa-service.com

Please note: We do not accept postal applications. We cannot process your application if you have not paid our service fee. You can pay it [here](#).

DISCLAIMER

By submitting an application and paying our service fee, I agree with the following:

1. I understand that Passport and Visa Service Ltd and its website www.passport-visa-service.com are not part of a government agency but a private company.

2. SENTRI card will cost you \$139.95 for service fee plus \$25 government fee for background and security checks. You need to pay the first fee through CCBill to start this process. Once your application is submitted, we will provide you access to your profile in the GOES system and you'll be able to pay the government fee. At your interview, you will be charged additionally two non-refundable fees: a \$14.50 fingerprint fee (for applicants over 14 years of age) and a system cost fee of \$82.75 (for applicants over 18 years of age).

3. Processing times vary by applicant, but on average you can expect your application to be processed within 3-5 months. The vetting process cannot be expedited.

4. Passport and Visa Service Ltd is not responsible for applicants who are denied by CBP and will not refund the fees paid.

5. I understand I am using Passport and Visa Service Ltd to apply for my SENTRI card and I agree to the [Refund Policy](#) and [Privacy Policy, Terms of Use](#) section of their website www.passport-visa-service.com

PRINT NAME

DATE:

YOUR ACCOUNT DETAILS

(Please leave blank if you do not remember your account details. We will create a new account for you.)

GOES ID

PASSWORD

EXPIRY DATE

PERSONAL INFORMATION

Please enter all information exactly as it appears in your passport

LAST NAME

FIRST NAME

MIDDLE NAME

OTHER NAME

DATE OF BIRTH
yyyy/mm/dd

GENDER

MALE

FEMALE

COUNTRY OF BIRTH

HEIGHT

EYE COLOR

CITY OF BIRTH

STATE/PROVINCE OF BIRTH

CONTACT DETAILS

PRIMARY PHONE #

EMAIL ADDRESS

CITIZENSHIP & NATIONALITY

YOU ARE A:

US CITIZEN

CANADIAN CITIZEN

US PERMANENT RESIDENT

CANADIAN PERMANENT RESIDENT

PASSPORT NUMBER

COUNTRY OF ISSUANCE

DATE OF EXPIRY
yyyy/mm/dd

NAME ON PASSPORT

VISA OR PR CARD NUMBER

TYPE OF DOCUMENT:

DATE OF EXPIRY
yyyy/mm/dd

COUNTRY OF ISSUANCE

NAME ON VISA OR PR CARD

DRIVER'S LICENCE INFORMATION

DRIVER'S LICENCE NUMBER

DATE OF EXPIRY
yyyy/mm/dd

EXACT NAME ON LICENCE

CHECK HERE IF THIS IS AN ENHANCED DRIVERS LICENCE /EDL/

COUNTRY OF ISSUANCE

STATE/PROVINCE OF ISSUANCE

CHECK HERE IF THIS IS A COMMERCIAL DRIVERS LICENCE /CDL/

CHECK HERE IF THERE IS HAZMAT ENDORSEMENT ON THE CDL

ADDRESS HISTORY FOR THE LAST 5 YEARS

STREET NUMBER STREET NAME

CITY COUNTRY

STATE/PROVINCE POSTAL/ZIP CODE

FROM YYYY/MM

TO PRESENT

MAILING ADDRESS /if different to your current address/

STREET NUMBER STREET NAME

CITY COUNTRY

STATE/PROVINCE POSTAL/ZIP CODE

FROM YYYY/MM

TO PRESENT

STREET NUMBER STREET NAME

CITY COUNTRY

STATE/PROVINCE

FROM YYYY/MM

TO YYYY/MM

STREET NUMBER STREET NAME

CITY COUNTRY

STATE/PROVINCE

FROM YYYY/MM

TO YYYY/MM

STREET NUMBER STREET NAME

CITY COUNTRY

STATE/PROVINCE

FROM YYYY/MM

TO YYYY/MM

STREET NUMBER STREET NAME

CITY COUNTRY

STATE/PROVINCE

FROM YYYY/MM

TO YYYY/MM

EMPLOYMENT HISTORY FOR THE LAST 5 YEARS

EMPLOYMENT STATUS	<input type="text"/>	FROM YYYY/MM	<input type="text"/>	TO PRESENT			
JOB TITLE	<input type="text"/>						
STREET NUMBER	<input type="text"/>	STREET NAME	<input type="text"/>				
EMPLOYER'S PHONE	<input type="text"/>						
CITY	<input type="text"/>	COUNTRY	<input type="text"/>	STATE/PROVINCE	<input type="text"/>	POSTAL/ZIP CODE	<input type="text"/>

EMPLOYMENT STATUS	<input type="text"/>	FROM YYYY/MM	<input type="text"/>	TO YYYY/MM	<input type="text"/>		
JOB TITLE	<input type="text"/>						
EMPLOYER	<input type="text"/>						
STREET NUMBER	<input type="text"/>	STREET NAME	<input type="text"/>				
EMPLOYER'S PHONE	<input type="text"/>						
CITY	<input type="text"/>	COUNTRY	<input type="text"/>	STATE/PROVINCE	<input type="text"/>	POSTAL/ZIP CODE	<input type="text"/>

EMPLOYMENT STATUS	<input type="text"/>	FROM YYYY/MM	<input type="text"/>	TO YYYY/MM	<input type="text"/>		
JOB TITLE	<input type="text"/>						
EMPLOYER	<input type="text"/>						
STREET NUMBER	<input type="text"/>	STREET NAME	<input type="text"/>				
EMPLOYER'S PHONE	<input type="text"/>						
CITY	<input type="text"/>	COUNTRY	<input type="text"/>	STATE/PROVINCE	<input type="text"/>	POSTAL/ZIP CODE	<input type="text"/>

EMPLOYMENT STATUS	<input type="text"/>	FROM YYYY/MM	<input type="text"/>	TO YYYY/MM	<input type="text"/>		
JOB TITLE	<input type="text"/>						
EMPLOYER	<input type="text"/>						
STREET NUMBER	<input type="text"/>	STREET NAME	<input type="text"/>				
EMPLOYER'S PHONE	<input type="text"/>						
CITY	<input type="text"/>	COUNTRY	<input type="text"/>	STATE/PROVINCE	<input type="text"/>	POSTAL/ZIP CODE	<input type="text"/>

TRAVEL HISTORY

Please list all the countries you have traveled to in the last 5 years besides Canada, USA and Mexico.

ADDITIONAL INFORMATION

Have you ever been convicted of a criminal offense (including misdemeanor or felony traffic violations) in the USA or any other country?

NO YES

Have you ever received a waiver of inadmissibility to the USA from a US government agency?

NO YES

Have you ever been in violation of US customs laws?

NO YES

Have you ever been found in violation of immigration laws?

NO YES

IF YOU HAVE ANSWERED YES TO ANY OF THE ABOVE QUESTIONS PLEASE GIVE EXACT DETAILS BELOW:

VEHICLE INFORMATION

CAR MAKE CAR MODEL YEAR

LICENCE PLATE NUMBER VIN NUMBER

STATE WHERE LICENCE PLATE WAS ISSUED OWNER NAME

OWNER ADDRESS OWNER ADDRESS

OWNER PHONE OWNER D.O.B (yyyy/mm/dd)

MEXICAN CITIZENS MUST PROVIDE:

U.S. CONTACT

FULL NAME

AS OF DATE: YYYY/MM STATE

STREET ADDRESS ZIP CODE

CITY PHONE NUMBER

CONFIRMATION

I CONFIRM THAT THE INFORMATION PROVIDED ON THIS FORM IS CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

By signing below and paying the service fee I agree and understand Passport and Visa's [Terms of Use](#) and [Refund Policy](#) described on their website: passport-visa-service.com

PRINT NAME