

81 Bradbeer Crescent Thornhill, ON L4J 5N6

Tel: 1-416-300-4028



Singapore Tourist visa Application for citizens of China living in Alberta

	Please enter your contact information							
Name:								
Email:								
Tel:	Mobile:							
The latest date you need your passport returned in time for your travel:								

To avoid tests and quarantine, travellers must fulfil the public health requirements below. Travellers who cannot meet the public health requirements and refuse any test(s) and/or quarantine may be turned away from Singapore.

1. Yellow Fever Requirements

Produce an International Certificate of Vaccination for Yellow Fever, if you have visited any country at risk of Yellow Fever transmission in the past six (6) days before arrival in Singapore.

Travellers must serve quarantine for up to six (6) days on arrival if they cannot meet the requirement. Quarantine also applies to those who are ineligible to receive the vaccination e.g., children aged one year and below and individuals with contraindications.;

2. COVID-19 Requirements

There are no longer any COVID-19 measures for travellers arriving in Singapore from 13 Feb 2023, regardless of vaccination status or traveller profile. Travellers must ensure that they fulfil all other general entry requirements below.

3. Singapore Arrival Card - Mandatory to submit 3 days before entering Singapore

Additionally, all Singapore-bound passengers must use the TraceTogether app in Singapore to facilitate contact tracing: https://www.tracetogether.gov.sg.

Please make sure that application forms are not printed on double-sided paper.

Travelers must only apply within 1 month prior to the intended date of arrival into Singapore.



Singapore tourist visa checklist



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Filled	out and signed Singapore tourist visa application form. The form is enclosed.
	ned copy of China passport. Photocopy of current travel document/passport biodata page (travel document must be valid ix months from the date of entry into Singapore).
-	port-type photograph: 1. Include a passport style photo, with a white background, taken within the last 3 months. You may to upload a photo to your order for us to print. There is a charge associated with this service.
Paym	ent. Credit Card Authorization form, Certified Check, or Money Order payable to VisaHQ.ca.
Proof	of status. A copy of the permanent resident card or a copy of valid Canadian Work/Study Visa/Permit.
☐ Hotel	Reservations. Copy of hotel reservations (Applicant's name must be on Hotel Reservation).
	r of Introduction. Completed form V39A - Letter of Introduction for Visa Application to be completed by a local contact who is Citizen or Permanent Resident who is at least 21 years old with an NRIC number. For Travel Document holders or select
countries/reg	gions that require an LOI, applications with no LOI will be assessed on a case-by-case basis. For business visits , the signed
LOI must be	completed by a local contact acting on behalf of the company in Singapore. The local contact must be a Singapore Citizen or
Permanent P	Resident with an NRIC number.
	t itinerary. Flight tickets reservation showing both arrival and departure from Singapore – payment confirmation is not t must include travel dates and flight numbers.
	spore Arrival Card with Electronic Health Declaration. Apply here or install the MyICA Mobile app for Android and Apple is not a requirement for your visa application but is required prior to traveling to Singapore.



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Singapore Tourist visa Application

Type of visa	Validity	Processing time	Embassy fee	Service fee	HST	Total
Multiple entry	up to 63 days	5-15 business days	\$31.00	\$199.00	\$9.95	\$239.95
Single entry	up to 30 days	5-15 business days	\$31.00	\$199.00	\$9.95	\$239.95

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 Visa of \$	HQ.ca Terms of Service and aut	horize to charge my credit card for t	he amount
Name on the Credit Card:			
Credit card number:	-	-	
Exp. date:	1	CVC:	
Credit Card Billing Address:			
Signature:			
Comments:			
	Thank y We accept all majo		
	we accept all majo	—	
	VISA Pay	∕Pal GSA SmartPay® 2	

FORM 14A IMMIGRATION ACT 1959 [SECTION – 55(1)]

Notes:

* Check the box where appropriate

Affix a recent Passport-size photograph here

APPLICATION FOR ENTRY VISA

ATTLICATION FOR ENTRY VISA																										
PART I – PARTICULARS OF APPLICANT																										
Name: (Full name as shown in travel document)																										
Alias:																										l
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		ļ	Ш			!								!												
Date of Birth: D D	_		M]	Y	Y	Y	Y			Sex:	*		Mal	e		Fen	nale								
Marital Status:* Sing	gle		Mar	ried	l 🗌	Sep	oara	ted		Divo	orce	d [] w	idov	ved		Col	nabi	ted		Cus	stom	ary			
Nationality/Citizenship of Spouse:*			Sin	gap	ore (Citiz	en				N	RIC	No													
			Sing	gapo	ore P	erm	ane	nt R	Resid	lent	N	RIC	No													
			Oth	ers	(Plea	ase S	Spec	ify):	·																_	
Country/Place of Birth:																										
State/Province of Birth:																										
Race: (e.g. Malay, Indian, Chinese, Caucasian, etc)																										
Nationality/Citizenship:																										
Type of Travel Document Held:* International Passport Service Passport Others (please specify) Diplomatic Passport Certificate of Identity Certificate of Identity																										
Travel Document No.:																										
Travel Document Issued Date:			<u> [</u>			_[Exp	piry	Dat	e: [<u> </u>			-[
G	D	D		M	M]	Y	Y	Y	Y				1	- 1	D	D		M	M		Y	Y	Y	Y	l
Country/Place of Issue:																										
For Chinese Nationals Only																										
PRC ID Number																										

Address in Country/Place of Origin/Residence								
Country/Place of Origin/ Residence:								
Division/State/Province of Origin/Residence:								
Prefecture of Origin/ Residence:								
County/District of Origin/Residence:								
Address:								
PART II – OTHER DETAILS								
Email Address:								
Contact Number:								
Occupation:								
Highest Academic/ No Formal Education Primary Secondary Pre-University Professional Qualifications Attained:* Diploma University Post-Graduate								
Annual Income in Singapore dollars (SGD):								
Religion:								
Expected Date of Arrival in Sing	gapore: D D	M M Y	Y Y Y					
Type of Visa:* Single Journ	ney Double Joi	urney 🔲 Tripl	e Journey	Multiple Journey				
Purpose of visit:*	ocial Busi	iness						
Details of purpose:								
How long do you intend to stay i	in Singapore:*	Less than 30	days M	fore than 30 days				
If your intended stay in Singapore is more than 30 days, please state the reason for your intended length of stay and the duration								
					-			

Address in Singapore								
Where will you be staying in Singapore?:*								
□ Next of Kin's Place □ Relative's Place □ Friend's Place □ Hotel □ Others (Please specify):								
Block/House No.: Floor No.: Unit No.: Postal Code: Street Name: Contact No:								
Building Name:								
Did you reside in other co	ountries/places, other than your country/place of origin, for one year or mor	e during the last 5 years ?*						
☐Yes ☐No		o during the last e yours t						
If yes, please furnish detai	ils	Period of Stay						
Country/Place	Address	From To						
	Details of Travelling Companion (Only for applicant who is 12 years old or less at the point of application. Details are not required if applicant is accompanied by an							
Relationship of Travelling Companion To Applicant:								
Name:								
Date of Birth:	D D M M Y Y Y Y Y Male Fem	nale						
Nationality/Citizenship:								
Travel Document Number:								

DADT III DADTICIII ADC OF LOCAL CONTACT																									
PART III – PARTICULARS OF LOCAL CONTACT																									
Details of Local Contact or Company/Hotel in Singapore																									
Name of Local Contact /Company/Hotel:		\exists																							
Relationship of Local Contact/Company/ Hotel to Applicant:	al Contact/Company/																								
Contact No.:							En	nail .	Add	ress	:														
											-													_	
PART IV – ANTECEDEN	TO TV	F A	PPI	ICA	NT	*																			
(a) Have you ever been refused entry into or deported from any country/place, including Singapore?																									
PART V - DECLARATIO)N B	Y A	PPI	IC A	NT																				
I declare that all inform understand that, if I hav and any facilities, rights of	e con	ceal	ed r	eleva	nt ii	ıforı	nati	on o	r pr	ovide	ed fa	ılse, i	inac	curat	e or										
I undertake not to misus make me an undesirable															ctivit	ies d	lurin	ng my	y sta	y in	Sing	gapo	re wl	nich	would
I undertake to comply modification or re-enactn													and	l any	y reş	gulat	ions	ma	de t	here	unde	r or	any	sta	tutory
I undertake not to involve	e in aı	ny cı	rimi	nal o	ffeno	es i	n Sir	ıgap	ore.																
I undertake not to indulg	e in a	ny a	ctivi	ties v	whic	h ar	e inc	onsi	stent	with	ı the	pur	pose	for v	whic	h the	imr	nigra	ation	pas	ses h	ave l	been	issue	d
I further undertake not t issued under the Employ										nt, b	usin	ess o	r oc	cupa	tion	whil	st in	Sing	gapo	re w	ithou	ıt a	valid	wor	k pass
I am aware that overstay imprisonment and caning		r wo	rkin	g ille	gally	y in S	Sing	apoı	e is	a ser	ious	offei	nce a	and o	n co	nvic	tion,	the j	pena	lties	may	incl	ude 1	mano	latory
I understand that if the Controller of Immigration is satisfied that I or any member of my family breaches this undertaking or becomes an undesirable or prohibited immigrant, he will cancel my immigration pass and the passes of the members of my family, and we may be required to leave Singapore within 24 hours of such cancellation.																									
I understand that this ap discretionary at the point			for a	and I	osse	ssio	n of	a vis	a do	es no	ot gu	aran	tee (entry	into	Sin	gapo	re a	nd p	ermi	ssio	ı to (entry	is er	ntirely
I give my consent for your department to obtain and verify information from or with any source as you deem appropriate for the assessment of my application for immigration facilities.																									
Date Signature of Applicant																									
Date												JIZII	utul	UI /	ThhT	call	ı								

Letter of Authorization

		Date:
To whom it may concern:		
	authorize essing of my visa. I have given my consen uments, as well as permission to discuss r ed necessary.	t allowing him to submit
Signature of Applicant		