

Monday-Friday
9:00 am- 5:00 pm
(312) 372-2703

Passport, Visa &
Legalization Service
fax (312) 372-2715

PERRY INTERNATIONAL
100 West Monroe
Chicago, IL 60603
www.perryvisa.com

International Driving Permit Instructions

You should have 3 pages: the instructions below, a 1 page application, and our order form. Estimates presume that documents are received in good order and in adequate time. Prices and requirements are subject to change without notice. By sending your documents to Perry International, you accept and agree to the terms and conditions listed on our web sites policy page.

The estimated processing time is 5 business days. The items below are required:

- An estimated deposit per person of \$95 (This includes the permit fee of \$15, our service charge of \$55 and a return Federal Express charge of \$25)
- A Perry International order form so we know when and where to return your documents
- 2 passport quality color photos taken in the last six months, 2"x 2", with a clear white background
- A copy of the front and back of your valid U. S. driver's license
- 1 application form

**APPLICATION FOR INTERNATIONAL DRIVING PERMIT
or
INTER-AMERICAN DRIVING PERMIT**

FEE FOR EACH PERMIT \$10.00

Issuance of Permit is restricted to persons EIGHTEEN YEARS or over who hold a valid U.S.A. or Territorial License. PERMIT VALID FOR ONE YEAR. Not renewable.

CHECK DESIRED PERMIT

- International Driving Permit (Fee \$10.00 and 2 Passport Type Photos signed on back)
- Inter-American Driving Permit *** (see reverse side) (Fee \$10.00 and 2 Passport Type Photos signed on back)

MANDATORY REQUIREMENTS

- (1) Attach 2 recent signed Passport Type Photos (2" x 2")
- (2) Enclose permit fee of \$10.00 (NO CASH)
- (3) If mailing application, a photocopy of U.S. Driver's License must accompany completed application.

NOTE: IT IS IMPORTANT THAT YOUR U.S.A. OR TERRITORIAL LICENSE BE CARRIED WITH THE PERMIT AT ALL TIMES. The International or Inter-American Permit is not valid for driving in the United States.

PRINT NAME IN FULL. No Initials

Mr. Mrs. Ms. (Circle One)
FIRST _____ MIDDLE _____ LAST _____

PHONE _____ HOME STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

U.S. DRIVER'S LICENSE NO. _____ STATE OF ISSUE _____ EXPIRATION DATE _____

BIRTHPLACE:
CITY _____ STATE OR COUNTRY _____ BIRTH DATE (MO . DAY YEAR) _____

DATE PERMIT TO BE EFFECTIVE _____ DEPARTURE DATE FROM U.S. _____

FOREIGN ADDRESS (If known) _____

PLEASE CHECK THE APPROPRIATE BOX BELOW TO INDICATE THE TYPE OF VEHICLE FOR WHICH YOU NOW HOLD A VALID U.S.A. OR TERRITORIAL DRIVER'S LICENSE, AND FOR WHICH YOU DESIRE THIS PERMIT:

<input type="checkbox"/> MOTORCYCLE	<input type="checkbox"/> PASSENGER CAR	<input type="checkbox"/> VEHICLE OVER 7,700lbs	<input type="checkbox"/> VEHICLE OVER 8 SEATS	<input type="checkbox"/> VEHICLE WITH HEAVY TRAILER
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I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, AND THAT THE LICENSE INDICATED HAS NOT BEEN SUSPENDED NOR REVOKED. I FURTHER CERTIFY THAT I UNDERSTAND THAT A VALID STATE DRIVER'S LICENSE MUST ACCOMPANY THIS PERMIT, AND THAT THIS PERMIT IS VALID ONLY AS LONG AS THE STATE LICENSE IS VALID, BUT NOT TO EXCEED ONE YEAR FROM THE DATE THE PERMIT IS ISSUED.

SIGNATURE _____ DATE _____
(signature mandatory for issuance of Permit)

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Order Form for Visas
(Only 1 per order needed)

Client's name(s) as listed in passport(s) _____

Departure date from the United States is _____

Number of passports included with this order ____

Countries requesting visas for _____

These 3 options are ONLY available IF the instruction page lists the option

___ Will pay the rush fees to have my documents back by _____ (date)

___ Will pay the additional fee for _____ (number of entries)

___ Will pay the additional fee for visa support documents (only for former Soviet Republics)

(Optional for US passports only) Embassy registration as explained in the instructions

___ Will pay the \$20 fee to register this trip at the nearest US embassy or consulate

In an emergency the embassy should contact the client at what e-mail _____

Contact name if Perry International has questions _____

Phone: _____

E-mail: _____

Complete at least one address and phone number even if payment is enclosed

Address to send invoice to: (if different)

Address to return documents to: (No P.O. Boxes)

Attn: _____

Attn: _____

Phone: _____

Phone: _____

If paying by credit card you do not need to send a deposit

Credit Card # _____

Expiration date: ___/___

Signature of card holder: _____