



Ministry of Interior

United Arab Emirates

Short term visa (30 days)



5.2 Short Term Visa (30 Days)

Once you select the service, the following page appears.

Application Info.	Attachments	Online Payment
Step: Application Info.		
Department *	Natur Immig Admin Abu Dhabi	
Nationality *	AUSTRIA	
English Full Name *		
Gender *	Male	
Relationship *	Son	
Marital Status *	Single	
Religion *	Jewish	
Faith *	Undefined	
Profession *	UNKNOWN	
Date Of Birth *	29/04/1985	
Country Of Birth *	AUSTRALIAN	
Place Of Birth *	Sdney	
Passport Type *	Passport	
Passport ID *	J1236985	
Passport Issue Country *	AUSTRALIAN	
Passport Issue Date *	07/11/2014	
Passport Expiry Date *	08/11/2024	
Permenant Country *	AUSTRALIAN	
Address Abroad *	Sdney	
Telephone No Abroad *	00612345678910	
Delivery Info.		
Delivery Emirate *	Abu Dhabi	
Email Address *	john@visaexample.com	
		Save Next



Attach the required documents then click on **Next**.

Application Info. | **Attachments** | Online Payment

Step: Attachments

List of Required Attachments.
Documents types allowed is .jpg, .bmp, .jpeg
Maximum size allowed is 1 MB for each upload.

House Rent Contract *	<input type="button" value="Choose File"/> No file chosen
Electricity Bill *	<input type="button" value="Choose File"/> No file chosen
New personal photo *	<input type="button" value="Choose File"/> No file chosen
Passport Copy *	<input type="button" value="Choose File"/> No file chosen
Proof of income (Salary Certificate) *	<input type="button" value="Choose File"/> No file chosen
Laber Contract *	<input type="button" value="Choose File"/> No file chosen

Next

In case of no restrictions, the service fees will be displayed. Click to continue.

Application Info. | **Attachments** | **Online Payment** |

Step: Online Payment

Detailed Cost List.
To continue press "Next" button.


Number	Description	Amount
1	Basic Fee	400
2	Financial Guarantee - 1st Year	1000
3	Health Insurance Fees - ACNIC	50
4	Deposit Fee	100
	Total Amount	1550 - 1000

Next



Once done, click on **Pay Now** to proceed with payment.

The following appears, enter the required details and click on **Pay**.

ePayment by
etisalat

Payment beneficiary

Name: Abu Dhabi Police
City: Abu Dhabi
Country: United Arab Emirates

Payment description

Amount: [blurred]
Order description: [blurred]

Payment information




Payment instrument:

Card brand:

Card number:

Expiry month/year:

Security Code:





Also you can evaluate the service by clicking in the shown icons.

Evaluate Service

Step: Evaluate Service

Rate the service.

Rating

Notes

Send