

TURKS AND CAICOS ISLANDS BORDER FORCE

APPLICATION FOR EXTENSION OF STAY

NAME:	
PLACE:	
DATE OF BIRTH:	
NATIONALITY:	
PASSPORT OR ID NUMBER:	
NAME OF SHIP/AIRLINE & TICKET NO.:	
PORT OF EMBARKATION:	
DATE OF ARRIVAL:	
ADDRESS WHILE IN THE ISLANDS:	
REASON FOR EXTENSION:	
I,	tay while in the islands. I am aware that it is done unpaid, without permission from the entry of the lamble osecuted under Section (99) of the Immigration
SIGNATURE OF SURETY:	
SECTION (99) STATES: A person who knowingly har contravention of this ordinance commits an offense ar \$20,000, or imprisonment for a period of four years, or because of the surface of th	bors any individual who is in the islands in the islands in the orest of the constant of the constant in the c
• NAIVIE OF SURETY:	
OFFICIAL USE ONLY	(IN BLOCK LETTERS)
APPROVED:	DATE:
REFUSED:	IMMIGRATION REF. NO.: