



6 Month Tourist Visa

Please complete the attached form and return it to the address shown below;

Visas4oz.co.uk
35 Moorlands Drive
Nantwich
CW5 7PA.
United Kingdom

Should you require any assistance completing your application, please call our customer support team on 01270 842 670 or email info@visas4oz.co.uk

Payment Information

Please see website for up to date pricing information.

Cheque (Please attach) Credit/Debit Card

Credit/Debit Card Details

Card Holders Name

Card Number

Start Date

Expiry Date

Issue Number

Security Code



Australian Government

Department of Immigration and Multicultural Affairs

Application to visit Australia for tourism or other recreational activities

Form

48

1 How long do you wish to stay in Australia?

Up to 3 months

Up to 6 months

Up to 12 months

Your details

2 Name(s) as shown in your passport

Family name

Given names

Other names you are, or have been, known by
(including name at birth, previous married names, aliases)

3 Sex Male Female

4 Date of birth DAY MONTH YEAR
/ /

If you are 70 years or over, you will be asked to provide evidence from your doctor that you are fit to travel and show that you have medical insurance to cover your stay in Australia. Please contact an Australian overseas mission for further advice before lodging your application. If additional medical consultations are required, a decision on your visa application will be delayed.

5 Marital status

Married Separated Never married

Engaged Divorced

De facto Widowed

6 Place of birth Town/city
Country

7 Details from your passport

Passport number

Country of passport

Date of issue DAY MONTH YEAR
/ /

Date of expiry DAY MONTH YEAR
/ /

Issuing authority/Place of issue as shown in your passport

Make sure your passport is valid for the period of stay you are applying for.

8 Country of usual residence

9 Your current residential address

Note: A post office box address is not acceptable as a residential address. Failure to give your residential address will result in this application being invalid.

 POSTCODE

10 Postal address

(If the same as your residential address, write 'AS ABOVE')

 POSTCODE

11 Your telephone numbers

Office hours COUNTRY CODE AREA CODE NUMBER
() ()

After hours or mobile/cell
() ()

12 Do you agree to the department communicating with you by fax, e-mail or other electronic means?

No

Yes Give details

Fax number

COUNTRY CODE AREA CODE NUMBER
() ()

E-mail address

Note: If this visa application is refused, you will be notified by mail

Continued on the next page ►

Children included

You can include in this application any **children included in your passport who will be travelling with you.**

Children under 18 years of age, travelling alone or without one or both of their parents or legal guardians, require notarised authorisation from the non-accompanying parent(s) or guardian(s) to travel to Australia.

13 Are there any children included in your passport who will be travelling with you?

No

Yes ► Give details

Family name

Given names

Sex Male Female

Date of birth / /
DAY MONTH YEAR

Country of birth

Family name

Given names

Sex Male Female

Date of birth / /
DAY MONTH YEAR

Country of birth

Family name

Given names

Sex Male Female

Date of birth / /
DAY MONTH YEAR

Country of birth

Family name

Given names

Sex Male Female

Date of birth / /
DAY MONTH YEAR

Country of birth

Family name

Given names

Sex Male Female

Date of birth / /
DAY MONTH YEAR

Country of birth

If insufficient space, attach additional details.

Other information

14 Do you have any relatives, friends or contacts in Australia?

No Yes Give details

Citizen or permanent resident of Australia? (YES or NO)

Full name	Relationship to you	Date of birth			Address	
		DAY	MONTH	YEAR		
		/	/			
		/	/			
		/	/			
		/	/			

If insufficient space, attach additional details.

15 What is the purpose of your visit to Australia?

16 In the last 5 years, have you, or have any children included in this application, visited or lived outside your country of usual residence for more than 3 consecutive months?

No Yes Give details

17 Do you, or any children included in this application, intend to enter an Australian hospital, health care facility, nursing home for any purpose?

No Yes Give details

18 Have you, or any children included in this application:

- ever had, or currently have, tuberculosis?
- been in close contact with a person who has, or has had, active tuberculosis?
- ever had a chest x-ray which showed an abnormality?

No Yes Give details

19 During your proposed visit to Australia, do you, or any children included in this application have, or expect to incur, medical costs, or require treatment or medical follow up for:

- blood disorder
- cancer
- heart disease
- hepatitis B
- HIV infection, including AIDS
- kidney disease, including dialysis
- liver disease
- mental illness
- pregnancy
- respiratory disease that has required hospital admission
- any form of surgery
- any other health concerns

No Yes Give details

20 Do you require assistance with mobility or care in Australia or overseas?

No Yes Provide details of the care/mobility concerns that apply to you and how they are addressed

21 Do you intend performing medical procedures (eg. as a practicing/trainee doctor, dentist, nurse etc.) during your stay in Australia?

No Yes Provide details of medical/dental/nursing procedures you may be involved with in Australia

22 Have you, or any children included in this application, ever:

- been convicted of a crime or offence in any country (including any conviction which is now removed from official records)? No Yes
- been charged with any offence that is currently awaiting legal action? No Yes
- been acquitted of any criminal offence or other offence on the grounds of mental illness, insanity or unsoundness of mind? No Yes
- been removed or deported from any country (including Australia)? No Yes
- left any country to avoid being removed or deported? No Yes
- been refused a visa for Australia or another country? No Yes
- been excluded from or asked to leave any country (including Australia)? No Yes
- committed, or been involved in the commission of war crimes or crimes against humanity or human rights? No Yes
- been involved in any activities that would represent a risk to Australian national security? No Yes
- had any outstanding debts to the Australian Government or any public authority in Australia? No Yes
- been involved in any activity, or been convicted of any offence, relating to the illegal movement of people to any country (including Australia)? No Yes
- served in a military force or state sponsored/private militia, undergone any military/paramilitary training, or been trained in weapons/explosives use (however described)? No Yes

If you answered **'Yes'** to any of the above questions, provide all the relevant details. If insufficient space, attach an additional statement.

23 Have you, or any children included in this application, ever:

- been in Australia and not complied with visa conditions or departed Australia outside your authorised period of stay?
- had an application for entry to or further stay in Australia refused, or had a visa for Australia cancelled?

No Yes ► Give details

Assistance with this form

24 Did you receive assistance in completing this form?

No ► Go to Question 28

Yes ► Please give details of the person who assisted you

Title: Mr Mrs Miss Ms Other

Family name

Given names

Address

POSTCODE

Telephone number or daytime contact

COUNTRY CODE AREA CODE NUMBER

Office hours

Mobile phone

25 Is your agent registered with the Migration Agents Registration Authority (MARA)?

No

Yes ► Go to Question 28

26 Is your agent in Australia?

No ► Go to Question 28

Yes

27 Did you pay the person and/or give a gift for this assistance?

No

Yes ► How much did you pay?

AUD AND/OR

What kind of gift did you give? (*eg. jewellery*)

Value of gift (*approximately*)

AUD

Declaration

37 Having read the 'Conditions for a tourist visa to Australia' on page 4 of this form:

- I understand that the visa I am applying for does not permit me to work or undertake business activities in Australia.
- I understand that the visa I am applying for does not permit me to study for longer than 3 months in Australia.
- My intention to visit Australia is genuine and I will abide by the conditions and period of stay of the visa.
- I have adequate funds to meet all costs associated with the visit to and from Australia for all those included in this application.
- I have truthfully declared all relevant details requested of me in this application.
- I understand that the effect of the 8503 visa condition is that it will not be possible for me to apply to remain in Australia beyond the authorised period of stay of my visa. I agree to having this condition included on any visa issued to me as a result of this application.
- I acknowledge that I understand that if the 8503 visa condition is imposed on my visa, it will be indicated on the visa label, or in documents given to me by the department about the grant of my visa, by the condition code '8503' and by the short description 'No Further Stay'.
- I acknowledge that this means that the 8503 condition has been imposed on my visa, that I am required to depart Australia before the end of the period of stay authorised by my visa and that I understand the restriction that condition 8503 places on me.
- In any part of this form which has been completed with the assistance of another person, I declare that the information as set down is true and correct and has been included with my full knowledge, consent and understanding.
- If granted a visa, I will advise the overseas mission should my circumstances change prior to my travel to Australia.

**Signature
of applicant**

Date

DAY	MONTH	YEAR
/	/	

If you are unable to collect your passport, you will need to make adequate arrangements for its return to you.