



AFFIDAVIT OF PERSONAL DECISION FOR VISA REQUEST
CONSULATE-GENERAL OF BRAZIL IN WASHINGTON D.C

I, _____, _____
(full name) (nationality)

born on ___/___/___, in _____,
(day/month/year) (city, state, country)

holder of passport nº _____, issued on ___/___/___ by _____
(day/month/year) (country)

Do hereby affirm that I reside at _____
(complete address)

and am aware that the new visiting visa requirement is still not in force. Also understand that the Brazilian Government is not responsible for my personal decision to apply for the visiting visa during the term of the exemption, and reserves its right to change the date of entry into force of the aforementioned requirement.

Furthermore I swear and affirm under penalty of perjury that the facts set forth in this statement are true and accurate.

(Applicant signature)

___/___/___
(day) (month) (year)