

Request for Document Legalization or Translation Form

Account Number:

Call us for assistance:

General Information

Company Name:		Account Number:	
Name of Person Making Requested Service:			
Telephone:	Fax:	Email:	
Date of Request:	Date Documents Must Be Returned:		

Legalization Request

Requested Service:			
Country Where Documents Will Be Used:		Number of Documents:	
Translation Required: Yes <input type="checkbox"/> No <input type="checkbox"/>		Translate From:	To:
Documents are: Corporate <input type="checkbox"/> Personal <input type="checkbox"/>		Name of Document Owner:	
Special Instructions:			

Document Return Instructions

Return document(s) to this address via (please choose one): FedEx <input type="checkbox"/> UPS <input type="checkbox"/> Courier <input type="checkbox"/> Call for Instructions <input type="checkbox"/> Saturday Delivery <input type="checkbox"/>			
Name:		Company:	
Street:			
City:		State:	Zip:
This address is: <input type="checkbox"/> Residential <input type="checkbox"/> Business		Telephone:	
Name (Print):		Signature:	

Payment by Credit Card

I hereby authorize Trivisa to charge the cost of its professional services to the following credit card. I agree to pay the charged amount to my credit card company.

Name on Card:		
Card Number:	Expiration (mm/yy):	Signature:
Billing reference/Cost Center information (as it must appear on your invoice):		

Send Your Documents To:

4301 Connecticut Avenue NW, Suite 250, Washington, DC 20008 Or send to:
2 Greenway Plaza, Suite 200, Houston, TX 77046
Phone: 877-876-3266
Email: legalizations@trivisa.com