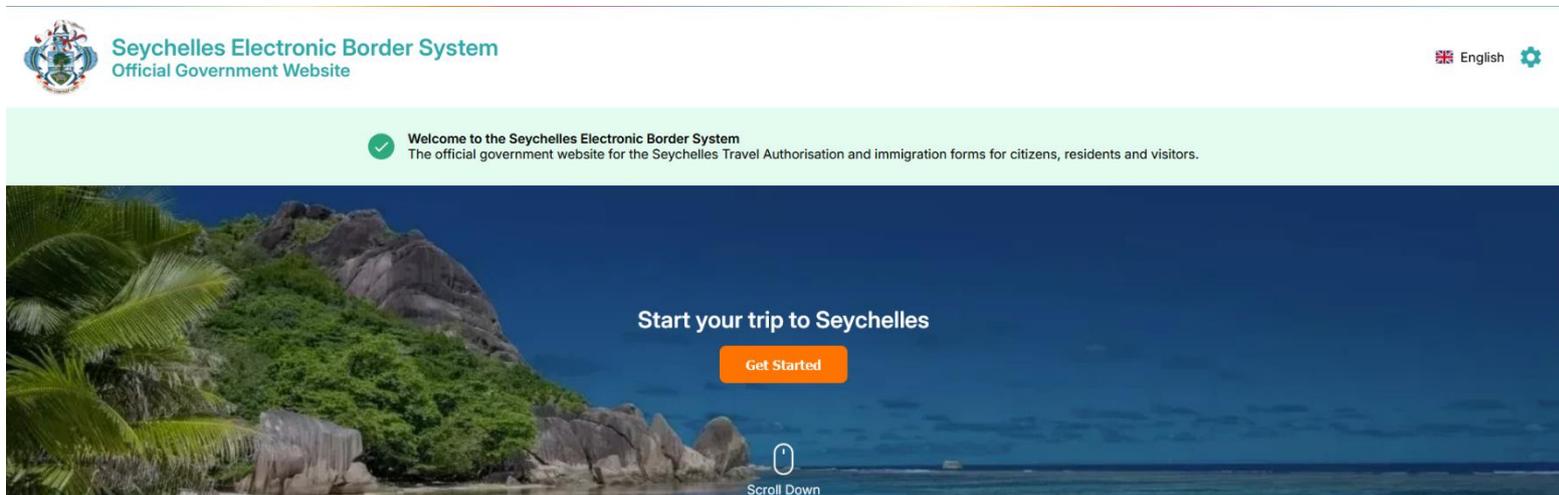


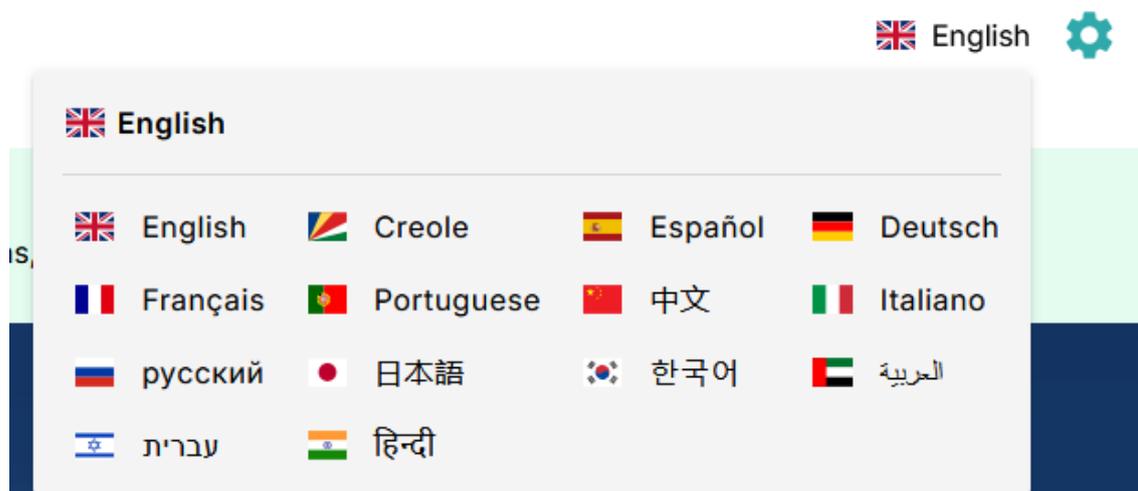
## Instrukcja wypełnienia tzw. Seychelles Electronic Border System.

Czas oczekiwania na zgodę na wjazd wynosi około 3 dni roboczych, ale zdarzają się sytuacje, że trzeba czekać dłużej.

1. Wejdź na stronę <https://seychelles.govtas.com/en>



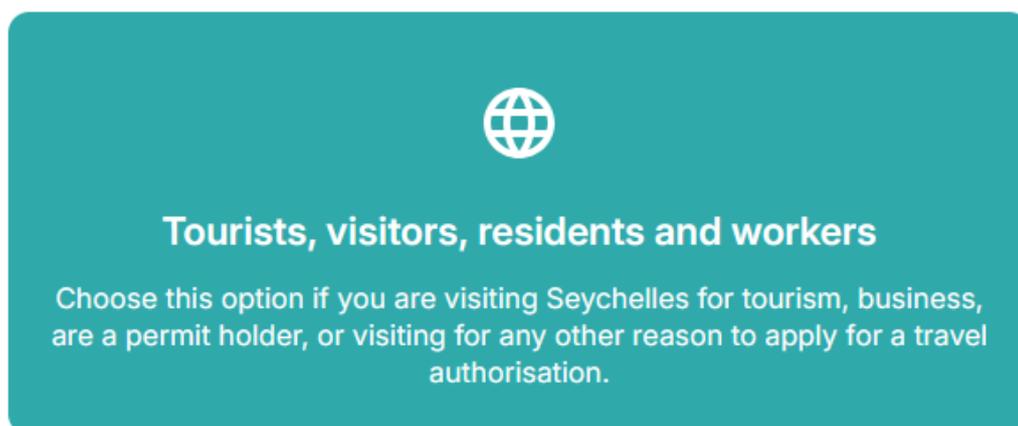
2. Wybierz język angielski.



3. Kliknij „**Get Started**”.



4. Wybierz „**Tourists, visitors, residents and workers**”.



5. Wybierz następujące opcje zaznaczone na czerwono.

### What do I need to apply?

All travellers are required to complete Immigration procedures when travelling to and from Seychelles.

There are different requirements for travel to the Seychelles permit holders and visitors. Please pay attention to the required documents that apply to you and / or your group.

For more information, please refer to the [Seychelles Immigration website](#).

Before you apply, ensure you have all of your mandatory documents ready.

### Visitors

Every non-citizen visitor to Seychelles must apply for the digital Travel Authorisation. This is mandatory as per the Immigration Act. This digital form replaces the blue paper form that was previously completed pre-arrival and serves as approval for travel to Seychelles. Seychelles Immigration reserves the right to deny entry on arrival. There are fees associated with this service.



## Declaration of Consent

The primary purpose of the Seychelles Electronic Border System Website is to facilitate travel to the Seychelles while protecting our citizens and travelers from health risks and security threats.

This website and mobile application are operated by and on behalf of the Seychelles Government pursuant to the rules and regulations prescribed by Seychelles Data Protection laws to ensure the privacy of your information. Information submitted by applicants through the Seychelles Electronic Border System Website is subject to privacy provisions and controls similar to those that have been established elsewhere for similar traveler screening programs. Access to such information is limited to those persons who have a need to know, recognised and approved by the Government of the Republic of the Seychelles.

Please refer to the Terms and Conditions of Use, General Information, Privacy Policy and FAQ for more details.

I have read and agreed to the above.

Opt-in to enter giveaways, and receive special offers and exciting updates for your trip from third parties.

Close

Continue

### Individual application

I am applying as an individual only.

### Group application

I am applying for a group application.

If you are a family, a couple, friends living together or a company submitting on behalf of your employees, you can save time by applying as a group. To apply as a group, you must meet certain eligibility requirements.

## 6. Wybieramy kraj z listy.

### Country of Residence

Please select your country of residence. This is the country where you live and pay taxes. If you are a resident Diplomat of the Seychelles, please select Seychelles.

Pol

#### All Countries

 French Polynesia

 Poland

Close

Continue

**7. Przygotuj skan pierwszej strony paszportu, na której znajduje się zdjęcie i dane osobowe. Wgraj je na stronie.**

### Passport Information

Provide a clear image of your passport's biographic page.

- Passport Information
- Selfie or Photo
- Contact Information
- Trip Information
- Health Declaration
- Customs Declaration
- Confirm and Proceed



Add a photo or scan of the required document here

Upload Passport Page

Close

Continue

I have reviewed the name and date of birth as scanned from this identity document along with its number and expiry date and confirm that it is correct.

Rescan

Continue

**8. Wgraj swoje zdjęcie.**



Add a photo or scan of the required document here

Upload Photo

Change Photo

Use This Photo



## 9. Uzupełniamy dane kontaktowe.

### Traveller Contact Information

Provide contact information of the lead traveller.

- ✓ Passport Information
- ✓ Selfie or Photo
- ➔ Contact Information
- Trip Information
- Health Declaration
- Customs Declaration
- Confirm and Proceed

+48 Phone Number NUMER TELEFONU

Email E-MIAL

Search Places in Poland ADRES W POLSCE

If you don't find your address, please select the nearest location.

Select Occupation WYBIERZ ZAWÓD

- ➔ Contact Information
- Trip Information
- Health Declaration
- Customs Declaration
- Confirm and Proceed

Select Occupation

**Emergency Contacts (optional)** OPCJONALNIE

Please specify at least one emergency contact.

Full Name of Emergency Contact OSOBA KONTAKTOWA

+48 Phone Number NUMER DO OSOBY KONTAKTOWEJ

+ Add Contact

Close

Save & Exit

Continue

## 10. Uzupełniamy dane dotyczące podróży zgodnie z rozkładem.

### Trip Information

Provide details about your trip

- Passport Information
- Selfie or Photo
- Contact Information
- Trip Information
- Health Declaration
- Customs Declaration
- Confirm and Proceed

Purpose of travel **CEL WIZYT - HOLIDAY**

**Arrival Details**

Arrival Date **DATA PRZYLOTU**

Your expected arrival date in the Seychelles.

Arriving by Air  Arriving by Sea

Select Airline **WYBIERZ LINIE LOTNICZĄ** Flight # **NUMER LOTU**

Provide information on your flight to the Seychelles.

Select the country of origin for your trip **WYBIERZ KRAJ WYLOTU**

### Departure Details

Departure Date **DATA WYLOTU**

Your expected departure date from the Seychelles.

Departing by Air  Departing by Sea

Select Airline **LINIA LOTNICZA** Flight # **NUMER LOTU**

If you know your flight information, please input here otherwise leave blank.

Final destination country **WYBIERZ KRAJ, DO KTÓREGO WRACASZ, NIE WPISUJ PORTÓW PRZESIADKOWYCH**

Select your final destination country. Do not select any transit countries.

### Where are you staying?

Enter the name of the hotel/guesthouse, boat charter company or employer's name for seaman and workers. You must provide booking confirmations for each accommodation you are staying in. If you are staying on a private yacht or cruise ship, this field is optional.

Where are you staying in the Seychelles? **NAZWA HOTELU**

From Date **DATA OD** To Date **DATA DO**

[+ Add Address](#)

Save & Exit

Continue

## 11. Wypełniamy deklarację zdrowotną.

**CZY W CIĄGU OSTATNICH 30 DNI MIAŁEŚ GORĄCZKĘ POWYŻEJ 38 C LUB KTÓRYŚ Z OBJAWÓW: BÓL GŁOWY, PLECÓW MIĘŚNI, OBRZEK WĘZŁÓW CHŁONNYCH, WYSYPKĘ ?**

In the past 30 days, have you experienced an acute illness with a fever over 38°C (101°F) accompanied by a severe headache, swollen glands, back pain, muscle ache, or intense fatigue, followed by a progressively developing rash that spread over your entire body, including the soles of your feet and the palms of your hands?

Yes  
**TAK**

No  
**NIE**

List any country you have or will be travelling to in the 30 days prior to arrival in Seychelles.

Select Countries + Add Country

Poland X

**KRAJE, KTÓRE ODWIEDZIŁEŚ W CIĄGU 30 DNI PRZED PRZYJAZDEM NA SESZELE**

## 12. Uzupełniamy deklarację celną, zaznaczając opcję TAK (YES) lub NIE (NO)

Are you or will you be bringing into Seychelles any animal or plant, any product of animal or plant origin, any kind of biological specimen or any tool or equipment used for rearing of animals and cultivation of plants?

Yes  No

**CZY PRZYWOZISZ LUB BĘDZIESZ PRZYWOZIĆ ZWIERZĘTA, ROŚLINY, PRODUKTY POCHODZENIA ZWIERZĘCEGO, OKAZY BIOLOGICZNE LUB NARZĘDZIA UŻYWANE DO HODOWLI ZWIERZĄT I UPRAWY ROŚLIN**

Will you be bringing more than your duty free alcohol allowance, which is either: 4 litres alcoholic beverages less than 16% ABV OR 2 litres above 16% ABV and 2 litres below 16% ABV? Note: passengers below the age of 18 cannot bring alcohol into the country.

Yes  No

**CZY MASZ ZAMIAR PRZYWIEZĆ WIĘCEJ NIŻ PRZYSŁUGUJĄCY CI LIMIT ALKOHOŁU W STREFIE BEZCŁOWEJ, KTÓRY WYNOŚI: 4 L NAPOJÓW ALKOHOLOWYCH O ZAWARTOŚCI PONIŻEJ 16% ALKOHOŁU LUB 2 L POWYŻEJ 16% ALKOHOŁU I 2 L PONIŻEJ 16% ALKOHOŁU? UWAGA: PASAŻEROWIE PONIŻEJ 18 LAT NIE MOGĄ WWOZIĆ ALKOHOŁU.**

Will you be bringing more than your duty free perfume allowance, which is a maximum of a 200ml bottle of perfume?

Yes  No

**CZY PRZYWIEZIESZ WIĘCEJ PERFUM NIŻ WYNOŚI LIMIT PRZYSŁUGUJĄCY CI W STREFIE BEZCŁOWEJ, KTÓRY WYNOŚI 200 ML**

Will you be bringing more than your duty free tobacco allowance, which is either: 200 cigarettes OR 100 cigarillos OR 50 cigars OR 200g of tobacco product? Note: passengers below the age of 18 cannot bring tobacco into the country.

Yes  No

**CZY PRZYWIEZIESZ WIĘCEJ TYTONIU NIŻ WYNOŚI LIMIT BEZCŁOWY, CZYLI 200 PAPIEROSÓW LUB 100 CYGARETEK LUB 50 CYGAR LUB 200 G WYROBÓW TYTONIOWYCH ? UWAGA: PASAŻEROWIE PONIŻEJ 18 LAT NIE MOGĄ WWOZIĆ TYTONIU**

Do you or will you have in your possession controlled substances, obscene articles, toxic substances, similar Seychelles military wear, firearms, spear guns or any dangerous weapons?

Yes  No

**CZY POSIADASZ LUB BĘDZIESZ POSIADAĆ SUBSTANCJE KONTROLOWANE (PSYCHOAKTYWNE), SUBSTANCJE TOKSYCZNE, ODZIEŻ PODOBNĄ DO UMUNDUROWANIA SIŁ ZBROJNYCH SESZELE, BROŃ PALNĄ, KUSZE PODWODNE LUB JAKĄKOLWIEK NIEBEZPIECZNĄ BROŃ**

Do you have in your possession or will you be carrying any commercial merchandise?

Yes  No

**CZY MASZ W POSIADANIU LUB BĘDZIESZ PRZEWOZIĆ JAKIEKOLWIEK TOWARY KOMERCYJNE**

Continue

**W przypadku zabrania większej ilości pieniędzy niż dopuszczalne 50 000 rupii seszelskich, przy pytaniu o przewożoną walutę, wybierając opcję YES pojawi się dodatkowe okno. Należy wybrać z listy walutę i podać dokładną kwotę**

Do you or will you have any goods that belongs to another person in your possession?

Yes

No

**CZY POSIADASZ LUB BĘDZIESZ POSIADAĆ DOBRA NALEŻĄCE DO INNEJ OSOBY**

In the past 14 days, have you visited a forest, farm, nature park or had any contact with farm animals or visited any properties that slaughters or processes animals?

Yes

No

**CZY W CIĄGU OSTATNICH 14 DNI BYŁEŚ W LESIE, ODWIEDZIŁEŚ GOSPODARSTWO ROLNE, PARK PRZYRODNICZY LUB MIAŁEŚ KONTAKT ZE ZWIERZĘTAMI · HODOWLANymi LUB ODWIEDZIŁEŚ OBIEKTY, W KTÓRYCH DOKONUJE SIĘ UBOJU ZWIERZĄT**

Are you or will you be transporting currency or monetary instruments (e.g. bearer negotiable instruments including cheque, bill of exchange, promissory note, traveller's cheque, bearer bond, money order, etc.) of a value greater than SCR 50,000 (approx. €3500/US\$3500) or foreign equivalent, in or out of the country?

Yes

No

**CZY PRZEWOZISZ LUB BĘDZIESZ PRZEWOZIĆ WALUTĘ LUB PAPIERY WARTOŚCIOWE (NP. WEKSEL, OBLIGACJE) O WARTOŚCI WIĘKSZEJ NIŻ RÓWNOWARTOŚĆ 50 000 SCR (ok. 3500 EUR/3500 USD) LUB RÓWNOWARTOŚĆ W WALUCIE OBCEJ, W JAKIEJKOLWIEK FORMIE**

Does the total value of all goods that were purchased abroad and that will remain in the Seychelles exceed SCR 15,000 (approx. €950/US\$1000) or foreign equivalent?

Yes

No

**CZY ŁĄCZNA WARTOŚĆ WSZYSTKICH ZAKUPIONYCH TOWARÓW ZA GRANICĄ, KTÓRE PZOOSTANĄ NA SESZELACH, PRZEKRACZA 15000 SCR(OK.950 EUR/1000USD) LUB RÓWNOWARTOŚĆ TEJ KWOTY W WALUCIE**

Continue

### 13. Załącz wymagane dokumenty.

#### Accommodation Booking Confirmations

**POTWIERDZENIA REZERWACJI NOCLEGÓW**

Upload your booking confirmation(s) for each location of your stay in Seychelles. This must include the name of the hotel/guesthouse, boat charter name or name of employer. If you're visiting friends and family, provide a letter of invitation.

**PRZEŚLIJ POTWIERDZENIE REZERWACJI MIEJSCA POBYTU NA SESZELACH. MUSI ZAWIERAĆ NAZWĘ HOTELU/PENSJONATU, NAZWĘ. JEŚLI ODWIEDZASZ RODZINĘ DOŁĄCZ LIST ZAPRASZAJĄCY**

Select File

#### Airline Booking Confirmation

**POTWIERDZENIE REZERWACJI LOTNICZEJ**

Upload your airline booking confirmation which clearly shows your international arrival and departure flight details.

**PRZEŚLIJ POTWIERDZENIE REZERWACJI LOTU, KTÓRE WYRAŹNIE ZAWIERA SZCZEGÓŁY PRZYLOTU I ODLOTU MIĘDZYNARODOWEGO.**

WYBIERZ PLIK

Select File

### Ten punkt można pominąć

#### Other documents

**POZOSTAŁE DOKUMENTY**

Upload any other useful documents that may help us process your application (e.g. GOP Permit if applicable).

**PRZEŚLIJ WSZELKIE INNE DOKUMENTY, KTÓRE MOGĄ NAM POMÓC W ROZPATRZENIU TWOJEGO WNIOSKU (NP. ZEZWOLENIE GOP, JEŚLI DOTYCZY)**

WYBIERZ PLIK

Select File

## 14. Potwierdź poprawność wprowadzonych danych.

**ŚWIADCZAM, ŻE DANE ZAWARTE WE ZNIOSKU SĄ POPRAWNE I ZGODNE Z PRAWDĄ. W PRZYPADKU GDY PODANE INFORMACJE OKAZĄ SIĘ FAŁSZYWE, JESTEM ŚWIADOMY ŻE PONIOSEŻ ZA NIE ODPOWIEDZIALNOŚĆ. ROZUMIEM I AKCEPTUJE WNIOSEK. PODANE DANE MOŻNA PRZEGLĄDAĆ I EDYTOWAĆ KLIKAJĄC W ODPowiednie SEKCJE. PRZECZYTAŁEM WARUNKI I AKCEPTUJE POLITYKĘ PRYWATNOŚCI DANYCH**

I hereby declare and confirm that I have filled the information required accurately completely and correctly, and that I have not withheld any relevant medical information or made any misleading statements. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I shall be held liable for it. I understand and agree that this declaration is final and irrevocable and accept to digitally sign this request. The information provided can be reviewed and edited by clicking on the relevant sections. I have read and agreed to the Terms and Conditions of Use, as well as the Data Privacy Policy.

I am the applicant and I understand and agree that this declaration is final and irrevocable and accept to digitally sign this request.

**JESTEM WNIOSKODAWCĄ, ROZUMIEM I AKCEPTUJE OŚWIADCZENIE. WYRAŻAM ZGODĘ NA CYFROWE PODPISANIE WNIOSKU**

I am NOT the applicant and I am completing this form on behalf of someone, either as an agent, as a legal guardian or as a parent of a child for whom I have legal authority. I do understand and agree that this declaration is final and irrevocable and accept to digitally sign this request.

**NIE JESTEM WNIOSKODAWCĄ, WYPEŁNIAM PLIK JAKO PEŁNOMOCNIK LUB OPIEKUN PRAWNY/RODZIC DZIECKA DLA KTÓREGO POSIADAM PEŁNOMOCNICTWO. ROZUMIEM I AKCEPTUJE OŚWIADCZENIE. WYRAŻAM ZGODĘ NA CYFROWE PODPISANIE WNIOSKU.**

### Additional Notes

#### DODATKOWE UWAGI

Please add any additional information that you believe would help us better process your application.

Wybierając opcje, wypełniam wniosek jako pełnomocnik pojawią się dodatkowe rubryki

I am NOT the applicant and I am completing this form on behalf of someone, either as an agent, as a legal guardian or as a parent of a child for whom I have legal authority. I do understand and agree that this declaration is final and irrevocable and accept to digitally sign this request.

Your Name

**IMIĘ**



+48



Phone Number

**TELEFON**

Your Email

**E-MAIL**

What is your relationship to the traveller?



Family Member



Friend



Travel Agency



Visa & eTA Assistance Company



Assistant



Other

**CZŁONEK RODZINY / PRZYJACIEL / AGENT TURYSTYCZNY / FIRMA OD WIZOWANIA / ASYSTENT / INNE**

## 15. Wybieramy opcje zatwierdzenia wniosku, która występuje w 3 wariantach.

### Processing Period

[?](#) Help

Select the best option below based on your flight check-in time. Your airline may refuse to check you in without a valid Travel Authorisation. All prices are exclusive of bank fees.

- Processing Period
- Medical Protection
- Buy a SIM Card
- Bus Cards
- Donate to Charity
- Complete your Application

- Standard Processing** €10.00
  - Your application will be processed in 24 hours or less.
  - Basic support
- Premium Processing** €30.00
  - Best Value
  - Your application will be processed in 6 hours or less.
  - Dedicated application agent for queries and support.
  - Premium support including email, WhatsApp and live chat.
  - Flexibility to change your travel dates up to 5 days if your plans change
- Urgent Processing** €70.00
  - Your application will be processed in 60 minutes or less.
  - Premium support including email, WhatsApp, live chat and direct telephone support.
  - Flexibility to change your travel dates up to 5 days if your plans change

## 16. Możemy rozszerzyć swój wniosek o DODATKOWE OPCJE m.in. ubezpieczenie zdrowotne. Jeśli nie jesteśmy zainteresowani, proszę wybrać SKIP i przejść do płatności.



- Essential Protection** €44.55
  - €4.95 / day / adult
  - Same day doctor access with full support for illness and injury. Everything your travel insurance will not do for you.
  - ✓ All pre existing conditions covered. No exclusions. No questions. Insurance rarely offers this.
  - ✓ Children under 10 covered free. Families get automatic protection without added cost.
  - ✓ 24/7 medical hotline for any illness or injury. Instant clinical support. No approvals. No waiting.
  - ✓ Same day doctor visit to your hotel, villa, or boat anywhere in Seychelles. Insurance does not send doctors to you. We do.
  - ✓ Care for common travel illnesses and injuries including fever, food poisoning, cuts, stings, bites, trauma, and other urgent needs. No searching for a clinic or travelling while sick.
  - ✓ Follow up care and monitoring until you recover. Insurance pays after the fact. We stay with you throughout.
  - ✓ Help with tests, medicines, and hospital visits. We handle the logistics so you never navigate the system alone.
  - ✓ Medical certificates for airlines, hotels, employers, and insurance claims. Immediate documentation without hassle.
  - ✓ Your doctor visit is free and includes documentation for insurance claims. No hidden fees. No out of pocket for your consultation.

- Basic Travel Pack - 7 days** €19.99  
10GB data and unlimited local calls & SMS, valid for 7 days.
- Standard Travel Pack - 21 days** €24.99  
15GB data and unlimited local calls & SMS, valid for 21 days.
- Premium Travel Pack - 21 days** €34.99  
35GB data and unlimited local calls & SMS, valid for 21 days.
- Premium Plus Travel Pack - 21 days** €44.99  
50GB data and unlimited local calls & SMS, valid for 21 days.



- 4 Day Bus Travel Card** €12.00  
Experience Seychelles! Enjoy unlimited bus trips valid for 4 days.  
Note: you cannot take large suitcases/bags on to the buses.
- 8 Day Bus Travel Card** €22.00  
Go further! Enjoy unlimited bus trips valid for 8 days.  
Note: you cannot take large suitcases/bags on to the buses.

## Donate to Charity

PRZEKAŻ DAROWIZNĘ

Help

Please consider donating to the Environmental Trust Fund. It was established as a special fund in 1994 under the Public Finance Management Act with the objectives of reducing pollution, protecting the environment, beautifying Seychelles and promoting environment education. **FUNDUSZ NA RZECZ OCHRONY ŚRODOWISKA**

- ✓ Processing Period
- ✓ Medical Protection
- ✓ Buy a SIM Card
- ✓ Bus Cards
- ➔ Donate to Charity
- Complete your Application

€10.00

€20.00

€50.00

€100.00

Total **€72.34**  
[View Summary](#)

Skip & Proceed

## 17. Przejdź do płatności.

## Complete your Application

Help

Pay safely and securely using one of the payment methods below. All application fees and donations are non-refundable and non-transferrable. Third party providers' terms & conditions and refund policies apply **ZAPŁAĆ BEZPIECZNIE. OPLATY NIE PODGLEGAJĄ ZWROTOWI.**

- ✓ Processing Period
- ✓ Medical Protection
- ✓ Buy a SIM Card
- ✓ Bus Cards
- ✓ Donate to Charity
- ➔ Complete your Application

Email

E-MAIL

Name on Card

IMIĘ I NAZWISKO



Card



Alipay



WeChat Pay

Card number

1234 1234 1234 1234 **NUMER KARTY**

Expiration date

MM / YY **DATA WAŻNOŚCI**

Security code

CVC **KOD**

Country

Poland

Total **€93.13**  
[View Summary](#)

Pay