

# Passenger Systems Program Office U.S. Customs & Border Protection

## Electronic System for Travel Authorization (ESTA) Application

Reference Guide for Public Users



U.S. Customs and  
Border Protection

January 31, 2011

# ESTA Welcome Page

<https://esta.cbp.dhs.gov>



U.S. Customs and Border Protection  
*Securing America's Borders*



Electronic System for  
Travel Authorization  
U.S. Department of Homeland Security

English  
Español  
日本語  
Nederlands  
Suomi

Čeština  
Français  
한국어  
Norsk  
Svenska

Dansk  
Ελληνικά  
Latviešu  
Português

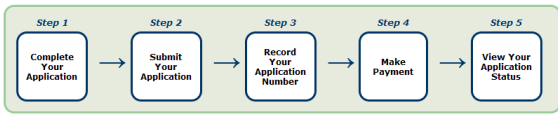
Deutsch  
Italiano  
Lietuvių  
Slovenčina

Eesti  
Magyar  
Slovenščina

[Help](#)

## Welcome to the Electronic System for Travel Authorization Web Site.

International travelers who are seeking to travel to the United States under the Visa Waiver Program (VWP) are now subject to enhanced security requirements and will be required to pay an administrative fee. All eligible travelers who wish to travel to the U.S. under the Visa Waiver Program must apply for authorization and then pay the fee using the following process:



Please refer to the [Help](#) link at the top of each Web page if you have questions.

Before you begin this application, make sure that you have a valid passport and credit card available. This application will only accept the following credit cards: MasterCard, VISA, American Express, and Discover (JCB, Diners Club).

Please provide all responses in English. Mandatory fields are indicated by a red asterisk \*.

### Apply for an Authorization to Travel to the United States

**Select this option if:**

- You are a citizen or eligible national of a Visa Waiver Program country.
- You are currently not in possession of a visitor's visa.
- Your travel is for 90 days or less.
- You plan to travel to the United States for business or pleasure.

**What information do I need to complete the application?**

**What are the passport requirements for travel under the Visa Waiver Program?**

### Update or Check the Status of a Previously Submitted Authorization to Travel to the United States

**Select this option if:**

- You previously submitted an application for an electronic travel authorization and you want to perform one of the following:
  - Determine the status of your travel authorization application.
  - Update your travel authorization application.
  - You saved your application information and want to return to it to pay the fee.

**What information can I update?**

**Please provide the following information about your application:**

**Application Number \***

**Birth Date**

**Day \***

**Month \***

**Year \***

**Passport Number \***

**If you are missing your Application Number, please click here.**

To Apply

To Check Status and/or Pay

Must Provide: Application #, Date of Birth, & Passport #

Link To Retrieve Application #

Paperwork Reduction Act Statement: an agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number. The control number for this collection is 1651-0111. The estimated average time to complete this submission is 15 minutes per respondent. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, 1300 Pennsylvania Avenue, Room 3.2.C., Washington DC 20229. Exp. Mar 31, 2011

The ESTA logo is a registered trademark of the U.S. Department of Homeland Security. Its use, without permission, is unauthorized and in violation of trademark law. For more information, or to request the use of the logo, please go to [help.cbp.gov](http://help.cbp.gov) and submit a request by clicking on "Ask a Question." When selecting the Product (under Additional Information) use "ESTA" and the sub-product "Logo Assistance" to expedite handling of your request.

[For inquiries or questions regarding this application, please click here.](#)

[Privacy Statement](#) | [www.cbp.gov/travel](http://www.cbp.gov/travel)

# Steps to Complete Application



## Disclaimer

The Electronic System for Travel Authorization performs checks against law enforcement databases. All travelers seeking admission to the United States under the Visa Waiver Program are required to obtain an electronic travel authorization using this system prior to being granted boarding.

If your electronic travel authorization application is approved, it establishes that you are eligible to travel, but does not establish that you are admissible to the United States under the Visa Waiver Program. Upon arrival to the United States, you will be inspected by a U.S. Customs and Border Protection Officer at a port of entry who may determine that you are inadmissible under the Visa Waiver Program or for any reason under United States law.

A determination that you are not eligible for electronic travel authorization does not preclude you from applying for a visa to travel to the United States.

All information provided by you, or on your behalf by a designated third party, must be true and correct. An electronic travel authorization may be revoked at any time and for any reason, such as new information influencing eligibility. You may be subject to administrative or criminal penalties if you knowingly and willfully make a materially false, fictitious, or fraudulent statement or representation in an electronic travel authorization application submitted by you or on your behalf.

**WARNING:** If upon application for admission to the United States at a port of entry you are admitted under the Visa Waiver Program (VWP) by a US Customs and Border Protection Officer, you may not accept unauthorized employment; or attend school; or represent the foreign information media during your visit under the program. You may not apply for: 1) a change of nonimmigrant status, 2) an extension of stay, or 3) adjustment of status to temporary or permanent resident, unless eligible under section 245(c)(4) of the Immigration and Nationality Act. Violation of these terms will subject you to REMOVAL.

Please indicate you have read and understand the information provided above:

- ☒ Yes, I have read and understand the information and agree to these terms.  
☐ No, I need additional clarification or I decline to provide acknowledgement.

Cancel

Next

[For inquiries or questions regarding this application, please click here.](#)

[Privacy Statement](#) | [www.cbp.gov/travel](http://www.cbp.gov/travel)

**Must Select 'Yes' to  
Continue to Promotion  
Act page**



## The Travel Promotion Act of 2009

On March 4, 2010, President Obama signed into law the Travel Promotion Act (TPA) of 2009, Pub. L. No. 111-145. The Act directs the Secretary of Homeland Security to establish a fee for the use of the ESTA system, comprised of \$10.00 for each VWP applicant receiving authorization to travel to the United States and \$4.00 for the processing of the ESTA application. Applicants who are denied authorization to travel to the U.S. under the VWP will only be charged \$4.00. The fee may only be paid by credit card. Applicants may save the application data and return to the application at a later date to enter the payment information. However, the application will not be submitted for processing until all payment information is completed.

**WARNING:** The administrative fee will be collected by credit card. It is crucial that all applicants enter their ESTA and credit card information accurately. If information is entered incorrectly, the applicant may be charged additional fees to reapply. Updates to an application will not accrue additional fees. Applicants who do not complete the payment process will not receive authorization to travel to the United States and will not be allowed to board any aircraft or vessel destined for the United States. If an applicant stops payment of the fee, his or her authorization to travel to the United States will be revoked. CBP is not responsible for additional fees that may be charged by the applicant's credit card company for the transaction. By pressing the "Apply" button in the application process, applicants agree not to dispute any administrative fee charged by CBP for the use of the ESTA system, and further acknowledge that there are no refunds.

Please indicate you have read and understand the information provided above:

- ☒ Yes, I have read and understand the information and agree to these terms.  
☐ No, I need additional clarification or I decline to provide acknowledgement.

Cancel

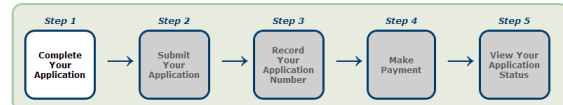
Next

[For inquiries or questions regarding this application, please click here.](#)

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Must Select 'Yes'  
to Continue to  
Application page

## Application



The following information is required of every nonimmigrant visitor not in possession of a visitor's visa who is a national of one of the countries listed in [8 CFR 217.2](#). Please enter all information requested. Each member of your traveling party must complete a separate application.

Please provide all responses in English. Mandatory fields are indicated by a red asterisk \*.

**Applicant Information**

Family Name \*

FEE

First (Given) Name \*

DEMO

Birth Date

Day \* 9

Month \* December

Year \* 1970

Country of Citizenship \*

FRANCE (FRA)

Sex (Male/Female) \*

☐ Male ☐ Female

Country where you live \*

FRANCE (FRA)

E-Mail Address

Telephone Number

Country Code --

Number

**Passport Information**

Passport Number \*

4LS69873

Passport Issuing Country (Country of Citizenship) \*

FRANCE (FRA)

Passport Issuance Date

Day \* 9

Month \* December

Year \* 2010

Passport Expiration Date

Day \* 9

Month \* December

Year \* 2020

**Travel Information**

City Where You are Boarding

Carrier Information

Carrier Name --Please Select

Flight Number or Vessel Name

**Address While In The United States**

Address Line 1

Address Line 2

City

State

--Please Select

Do any of the following apply to you? (Answer Yes or No)

Please select if you need additional help on any of these questions.

# Complete Application

NOTE: Fields shown filled here are all required

Certification Must Be Checked to Continue

A) Do you have a **communicable disease, physical or mental disorder**, or are you a **drug abuser or addict**? Yes ☐ No ☐

**Communicable Diseases**

Under United States law communicable diseases of public health significance include:

- Chancroid
- Gonorrhea
- Granuloma inguinale
- Leprosy, infectious
- Lymphogranuloma venereum
- Syphilis, infectious stage
- Tuberculosis, active
- And others as determined by the Department of Health and Human Services.

**Physical or Mental Disorders**

With regard to physical or mental disorders, answer "Yes" to this question if:

(a) You currently have a physical or mental disorder and a history of behavior associated with the disorder that may pose or has posed a threat to your property, safety or welfare or that of others; or

(b) You have or had a physical or mental disorder without associated behavior that may pose or has posed a threat to your property, safety or welfare of that of others; or

(c) You currently have a physical or mental disorder with associated behavior, but that behavior has not posed, does not currently pose nor will pose a threat to your property, safety or welfare or that of others; or

(d) You had a physical or mental disorder with associated behavior that posed a threat to your property, safety or welfare or that of others, but that behavior is unlikely to recur.

Answer "No" if:

(a) You currently have no physical or mental disorders; or

(b) You have or had a physical or mental disorder without associated behavior that may pose or has posed a threat to your property, safety or welfare of that of others; or

(c) You currently have a physical or mental disorder with associated behavior, but that behavior has not posed, does not currently pose nor will pose a threat to your property, safety or welfare or that of others; or

(d) You had a physical or mental disorder with associated behavior that posed a threat to your property, safety or welfare or that of others, but that behavior is unlikely to recur.

**Drug Abusers and Drug Addicts**

Under United States law persons may not be admissible if they have been determined to be a drug abuser or drug addict.

For further information refer to § 212(a)(1)(A) of the Immigration and Nationality Act, 8 U.S.C. § 1182(a)(1)(A), and corresponding regulations in the Code of Federal Regulations.

B) Have you ever been arrested or convicted for an offense or crime involving moral turpitude or a violation related to a controlled substance; or have been arrested or convicted for two or more offenses for which the aggregate sentence to confinement was five years or more; or have been a controlled substance trafficker; or are you seeking entry to engage in criminal or immoral activities? Yes ☐ No ☐

C) Have you ever been or are you now involved in espionage or sabotage; or in terrorist activities; or genocide; or between 1933 and 1945 were you involved, in any way, in persecutions associated with Nazi Germany or its allies? Yes ☐ No ☐

D) Are you seeking to work in the U.S.; or have you ever been excluded and deported; or been previously removed from the United States or procured or attempted to procure a visa or entry into the U.S. by fraud or misrepresentation? Yes ☐ No ☐

E) Have you ever detained, retained or withheld custody of a child from a U.S. citizen granted custody of the child? Yes ☐ No ☐

F) Have you ever been denied a U.S. visa or entry into the U.S. or had a U.S. visa canceled? Yes ☐ No ☐

If yes: when:  where:

G) Have you ever asserted immunity from prosecution? Yes ☐ No ☐

With regard to immunity from prosecution, answer "Yes" to this question if all of the following apply:

(a) you have committed a serious criminal offense in the United States as defined in 8 U.S.C. Sec. 1101(h), including any felony, at any time for which immunity from criminal jurisdiction was exercised; and

(b) as a consequence of the offense and exercise of immunity identified in (a), you have departed from the United States; and

(c) you have not subsequently submitted fully to the jurisdiction of the court in the United States having jurisdiction with respect to that offense.

For further information refer to § 212(a)(2)(E) and 101(h) of the Immigration and Nationality Act, 8 U.S.C. § 1182(a)(2)(E) and 1101(h).

**Waiver of Rights:** I have read and understand that I hereby waive for the duration of my travel authorization obtained via ESTA any rights to review or appeal of a U.S. Customs and Border Protection Officer's determination as to my admissibility, or to contest, other than on the basis of an application for asylum, any removal action arising from an application for admission under the Visa Waiver Program.

In addition to the above waiver, as a condition of each admission into the United States under the Visa Waiver Program, I agree that the submission of biometric identifiers (including fingerprints and photographs) during processing upon arrival in the United States shall reaffirm my waiver of any rights to review or appeal of a U.S. Customs and Border Protection Officer's determination as to my admissibility, or to contest, other than on the basis of an application for asylum, any removal action arising from an application for admission under the Visa Waiver Program. The answers and information furnished in this application are true and correct to the best of the applicant's knowledge and belief.

☒ \* **Certification:** I, the applicant, hereby certify that I have read, or have had read to me, all the questions and statements on this application and understand all the questions and statements on this application. The answers and information furnished in this application are true and correct to the best of my knowledge and belief.

☐ For third-parties submitting the application on behalf of the applicant, I hereby certify that I have read to the individual whose name appears on this application (applicant) all the questions and statements on this application. I further certify that the applicant certifies that he or she has read, or has had read to him or her, all the questions and statements on this application, understands all the questions and statements on this application, and waives any rights to review or appeal of a U.S. Customs and Border Protection Officer's determination as to his or her admissibility, or to contest, other than on the basis of an application for asylum, any removal action arising from an application for admission under the Visa Waiver Program. The answers and information furnished in this application are true and correct to the best of the applicant's knowledge and belief.

Cancel Reset Next

For inquiries or questions regarding this application, please click here.

Privacy Statement | [www.cbp.gov/travel](http://www.cbp.gov/travel)

# Proposed “Country of Birth” Data Element

**Applicant Information**

**Family Name \*** 

**First (Given) Name \*** 

**Country of Birth \***

**Birth Date**

**Day \*** 

**Month \*** 

**Year \*** 

**Country of Citizenship \*** 

**Sex (Male/Female) \*** 

☐ Male ☐ Female

**Country where you live \*** 

**E-Mail Address** 

**Telephone Number**

**Country Code** 

**Number** 

## Application Submittal



Please review all information for accuracy before submitting your application. If something is inaccurate, select the **Previous** button and edit the application with the correct information.

**Applicant Information**

Family Name: FEE  
First (Given) Name: DEMO  
Birth Date: Day 9, Month 12, Year 1970  
Country of Citizenship: FRANCE  
Country where you live: FRANCE  
Sex (Male/Female): M  
E-Mail Address:   
Telephone Number:   
Country Code:   
Number:   
Passport Information  
Passport Number: 45LS69873  
Passport Issuing Country: FRANCE  
Passport Issuance Date: Day 9, Month 12, Year 2010  
Passport Expiration Date: Day 9, Month 12, Year 2020  
Travel Information  
City Where You are Boarding:   
Carrier Information  
Carrier Name:   
Flight Number or Vessel Name:   
Address While in the United States  
Address Line 1:   
Address Line 2:   
City:   
State:   
Do any of the following apply to you? (Answer Yes or No)  
A) Do you have a communicable disease; physical or mental disorder; or are you a drug abuser or addict? No  
B) Have you ever been arrested or convicted for an offense or crime involving moral turpitude or a violation related to a controlled substance; or have been arrested or convicted for two or more offenses for which the aggregate sentence to confinement was five years or more; or have been a controlled substance trafficker; or are you seeking entry to engage in criminal or immoral activities? No  
C) Have you ever been or are you now involved in espionage or sabotage; or in terrorist activities; or genocide; or between 1933 and 1945 were you involved, in any way, in persecutions associated with Nazi Germany or its allies? No  
D) Are you seeking to work in the U.S., or have you ever been excluded and deported; or been previously removed from the United States or procured or attempted to procure a visa or entry into the U.S. by fraud or misrepresentation? No  
E) Have you ever detained, retained or withheld custody of a child from a U.S. citizen granted custody of the child? No  
F) Have you ever been denied a U.S. visa or entry into the U.S. or had a U.S. visa canceled? No  
If yes: when:   
where:   
G) Have you ever asserted immunity from prosecution? No  
For verification purposes, please reenter your Passport Number \*  
Passport Number 45LS69873  
For verification purposes, please reenter your Family Name \*  
Family Name Fee  
For verification purposes, please reenter your Country of Citizenship \*  
Country of Citizenship FRANCE (FRA)

# Submit Application

Must Verify :  
Passport #,  
Family Name,  
& Country of  
Citizenship

**Applicant Information**

Family Name: FEE  
First (Given) Name: DEMO  
Birth Date: Day 9, Month 12, Year 1970  
Country of Citizenship: FRANCE  
Country where you live: FRANCE  
Sex (Male/Female): M  
E-Mail Address:   
Telephone Number:   
Country Code:   
Number:   
Passport Information  
Passport Number: 45LS69873  
Passport Issuing Country: FRANCE  
Passport Issuance Date: Day 9, Month 12, Year 2010  
Passport Expiration Date: Day 9, Month 12, Year 2020  
For verification purposes, please reenter your Passport Number \*  
Passport Number 45LS69873  
For verification purposes, please reenter your Family Name \*  
Family Name Fee  
For verification purposes, please reenter your Country of Citizenship \*  
Country of Citizenship FRANCE (FRA)

Please review all information for accuracy before submitting your application. If something is inaccurate, select the **Previous** button and edit the application with the correct information.

Previous

Apply

# Record Application Number



U.S. Customs and Border Protection  
Securing America's Borders

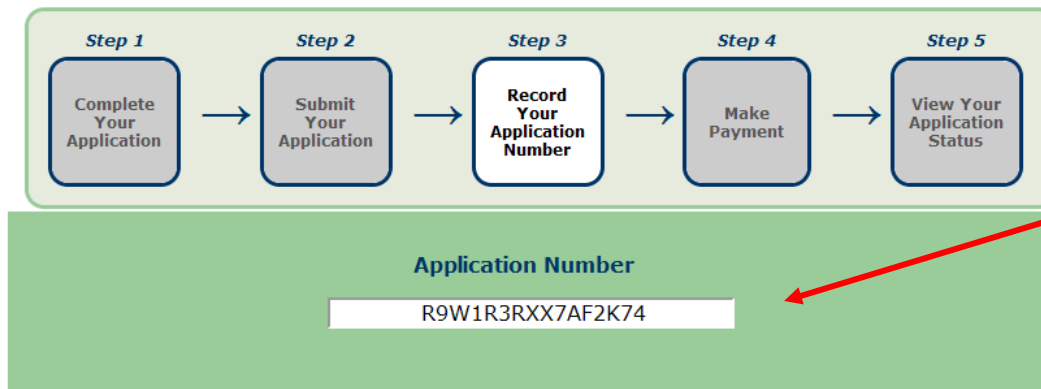
DHS.gov



[Help](#)

## Application Number

**NOTE: System will generate a 16 character alpha-numeric number.**



**Please record your Application Number.** Your Application Number will be required if you need to check the status of a completed application at another time.

Your application is not complete and will not be processed by CBP until the processing fee has been paid. You must complete payment within 7 days.

If you are not prepared to pay the fee at this time, you may save your application and return to it at a later date to complete the payment. Please record the application number in order to return to your application and pay the administrative fee.

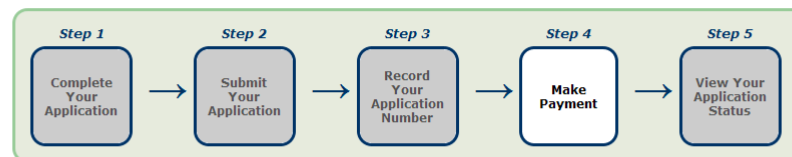
Next

[For inquiries or questions regarding this application, please click here.](#)

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# Application Status: Payment Required

## Application Status



## Payment Required

Your application is not complete and will not be processed by CBP until the processing fee has been paid. You must complete payment within 7 days.



Pay

|                           |                                 |
|---------------------------|---------------------------------|
| <b>Application Number</b> | <b>Expiration Date</b>          |
| R9W1R3RXX7AF2K74          | <b>Day</b> 9                    |
|                           | <b>Month</b> 12                 |
|                           | <b>Year</b> 2012                |
| <b>Passport Number</b>    | <b>Passport Issuing Country</b> |
| 45LS69873                 | FRANCE                          |

Exit

Update

[For inquiries or questions regarding this application, please click here.](#)

[Privacy Statement](#) | [www.cbp.gov/travel](http://www.cbp.gov/travel)

### Payment Required

Your application is not complete and will not be processed by CBP until the processing fee has been paid. You must complete payment within 7 days.

### Application Number

R9W1R3RXX7AF2K74

### Family Name

FEE

### First (Given) Name

DEMO

### Birth Date

Dec 9, 1970

### Sex (Male/Female)

M (Male)

### Country where you live

FRANCE

### E-Mail Address

### Telephone Number

Country Code  
Number

### Passport Number

45LS69873

### Passport Issuing Country

FRANCE

### Passport Issuance Date

Dec 9, 2010

### Passport Expiration Date

Dec 9, 2020

### City Where You are Boarding

### Carrier Information

Carrier  
Name

Flight Number or  
Vessel Name

### Address While In The United States

### Address Line 1

### Address Line 2

### City

### State

### Do any of the following apply to you? (Answer Yes or No)

- |                                                                                                                                                                                                                                                                                                                                                                                                           |    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| A) Do you have a communicable disease; physical or mental disorder; or are you a drug abuser or addict?                                                                                                                                                                                                                                                                                                   | No |
| B) Have you ever been arrested or convicted for an offense or crime involving moral turpitude or a violation related to a controlled substance; or have been arrested or convicted for two or more offenses for which the aggregate sentence to confinement was five years or more; or have been a controlled substance trafficker; or are you seeking entry to engage in criminal or immoral activities? | No |
| C) Have you ever been or are you now involved in espionage or sabotage; or in terrorist activities; or genocide; or between 1933 and 1945 were you involved, in any way, in persecutions associated with Nazi Germany or its allies?                                                                                                                                                                      | No |
| D) Are you seeking to work in the U.S.; or have you ever been excluded and deported; or been previously removed from the United States or procured or attempted to procure a visa or entry into the U.S. by fraud or misrepresentation?                                                                                                                                                                   | No |
| E) Have you ever detained, retained or withheld custody of a child from a U.S. citizen granted custody of the child?                                                                                                                                                                                                                                                                                      | No |
| F) Have you ever been denied a U.S. visa or entry into the U.S. or had a U.S. visa canceled?                                                                                                                                                                                                                                                                                                              | No |
| G) Have you ever asserted immunity from prosecution?                                                                                                                                                                                                                                                                                                                                                      | No |

### Payment Required

Your application is not complete and will not be processed by CBP until the processing fee has been paid. You must complete payment within 7 days.

Pay



Print

Results from selecting the  
Print Icon on the  
“Application Status” page.

# Online Help for ESTA Payment

## Is there a fee for a travel authorization?

Yes, there is a fee associated with the Travel Promotion Act of 2010. The fee is comprised of two parts:

- **Processing Fee.** All applicants requesting an electronic travel authorization are charged for the processing of the application.
- **Authorization Fee.** If your application is approved and you receive authorization to travel to the United States under the Visa Waiver Program, an additional \$10.00 will be charged to your credit card. If your electronic travel authorization is denied, you are only charged for the processing of your application.

CBP is not responsible for any additional fees that may be charged by your credit card company for the transaction.

[Return to Top of Page](#)

## How do I pay for my travel authorization?

All payments for electronic travel authorization applications must be made by credit card. The ESTA system currently accepts only the following credit cards: MasterCard, VISA, American Express, and Discover. Your application will not be submitted for processing until all payment information is received.

[Return to Top of Page](#)

## Is the credit card information I use for payment secure?

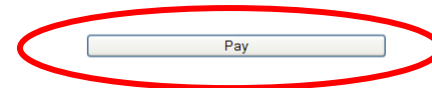
Yes. The ESTA system does not retain your credit card information after the transaction is processed.

# Required Information Needed to Submit Payment

This page displays after selecting the “Pay” button on the “Application Status” page.

## Payment Required

Your application is not complete and will not be processed by CBP until the processing fee has been paid. You must complete payment within 7 days.



 **U.S. Customs & Border Protection**  
U.S. Department of Homeland Security CBP.gov

HELP DHS.gov

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CBP Online Payment

Please enter your credit card information below. Then click the **Submit Payment** button to complete the process.

**\* Mandatory Fields**

Payment Amount (in US currency): **\$14.00**

Account Holder First Name \* Demo M.I. Last Name \* Fee

Billing Address \* 123 Main

Billing Address2

City Paris

Country \* FRANCE

State/Province

Postal/Zip Code 1234

Credit Card Type \* American Express

Credit Card Number \* 340000000000009 (Value should not contain spaces or dashes)

Expiration Date \* 02 / 2012

Security Code \* 9997

 1234 On the front of your card, find a 4-digit number

Cancel Submit Payment>

**NOTE:** These symbols are not allowed and will return an error message for an invalid address.

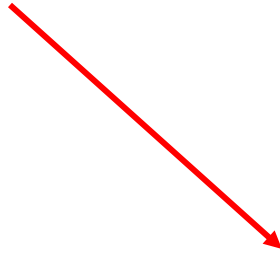
! @ # \$ % ^ & \* () \_ + = { } | \ : ; < > ? / ~

# Payment in Process Screen

## CBP Online Payment

Please enter your credit card information below. Then click the **Submit Payment** button to complete the process.  
**\* Mandatory Fields**

This page displays after selecting the “Submit Payment” button on “CBP Online Payment” page.



Payment Amount (in US currency): **\$14.00**

Account Holder First Name \*  M.I.  Last Name \*

Billing Address \*

Billing Address2

City

Country \*

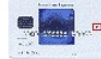
State/Province

Postal/Zip Code

Credit Card Type \*

Credit Card Number \*  (Value should not contain spaces)

Expiration Date \*  /

Security Code \*   On the front



**U.S. Customs & Border Protection**  
U.S. Department of Homeland Security  
CBP.gov

DHS.gov

Your payment is being processed.

It could take a few minutes. Please wait.

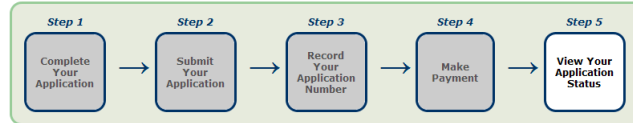


Note: Please avoid using your browser's Back Button - this may lead to incomplete data being transmitted and pages being loaded incorrectly.

# Application Status: Authorization Approved



## Application Status



Payment has been made and application has been **Approved**. Payment receipt is included.

### Authorization Approved

Your travel authorization has been approved and you are authorized to travel to the United States under the Visa Waiver Program. This does not guarantee admission to the United States; a Customs and Border Protection (CBP) officer at a port of entry will have the final determination.

If necessary, you can update the following information on an approved authorization: address while in the United States, flight information, email address, and phone number. To access your travel authorization, you will be required to provide your application number, passport number, and birth date. If you need to change any other information on the form, you must apply for a new travel authorization.

DHS recommends you print this screen for your records but you will not be required to present a copy of your authorization in order to travel.

You may exit this site or submit an application for another traveler at this time.



To begin planning your trip to the United States today, please visit [DiscoverAmerica.com](http://DiscoverAmerica.com), the Official Travel and Tourism website of the United States.

A screenshot of the ESTA application details page. It shows the "Application Number" (R9W1R3RXX7AF2K74) and "Expiration Date" (Day: 9, Month: 12, Year: 2012). Below this is the "Passport Number" (45LS69873) and "Passport Issuing Country" (FRANCE). A red circle highlights the "Expiration Date" section.A section titled "Payment Receipt" showing the "Payment Date" (December 9, 2010), "Payment Tracking Code" (A1B1C1), and "Payment Received" (\$14.00).

Exit

Update

**NOTE:** Expiration date shown is expiration date of ESTA application and **NOT** of applicant's passport.

## **To Update, Pay, or Check Status of an Existing Application**

- When application number is known (Slide # 15)
- When application number is not known (Slide # 16)

# At Welcome Page, to perform the following functions:

1. See current ESTA status
2. Return to pay for ESTA application
3. Update existing application

**Apply for an Authorization to Travel to the United States**

Select this option if:

- You are a citizen or eligible national of a Visa Waiver Program country.
- You are currently not in possession of a visitor's visa.
- Your travel is for 90 days or less.
- You plan to travel to the United States for business or pleasure.

[Which countries participate in the Visa Waiver Program?](#)

[What information do I need to complete the application?](#)

[What are the passport requirements for travel under the Visa Waiver Program?](#)

**Update or Check the Status of a Previously Submitted Authorization to Travel to the United States**

Select this option if:

- You previously submitted an application for an electronic travel authorization and you want to perform one of the following:
  - Determine the status of your travel authorization application.
  - Update your travel authorization application.
  - You saved your application information and want to return to it to pay the fee.

[What information can I update?](#)

Please provide the following information about your application:

**Application Number \*** ?

Birth Date

Day \* ? --

Month \* ? --

Year \* ? --

**Passport Number \*** ?

[If you are missing your Application Number, please click here.](#)

Apply

Update or Check Status

When applicant knows their application number they enter Application #, Date of Birth, & Passport Number.

**NOTE:** The data in these fields must be an exact match to ESTA application on file.



Electronic System for  
Travel Authorization  
U.S. Department of Homeland Security

[Help](#)

### Update or Check the Status of a Previously Submitted Authorization to Travel to the United States

#### Select this option if:

[What information can I update?](#)

- You previously submitted an application for an electronic travel authorization and you want to perform one of the following:
  - Determine the status of your travel authorization application.
  - Update your travel authorization application.
  - You saved your application information and want to return to it to pay the fee.

Please provide the following information about your application:

Application Number \* ?

Birth Date

Day \* ?

Month \* ?

Year \* ?

Passport Number \* ?

[If you are missing your Application Number, please click here.](#)

Update or Check Status

## Retrieve Your Application Number

Please enter your information as it appeared on your ESTA application.

### Applicant Information

Family Name \* ?

First (Given) Name \* ?

Birth Date

Day \* ?

Month \* ?

Year \* ?

### Passport Information

Passport Number \* ?

Passport Issuing Country  
(Country of Citizenship) \* ?

AUSTRALIA (AUS)

Cancel

Reset

Update or Check Status

When applicant doesn't know their application number they select this link which directs them to 'Retrieve Your Application Number' page shown here.

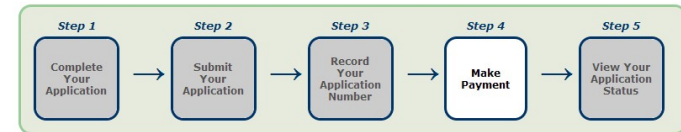
Applicant fills in fields shown above and clicks on 'Update or Check Status'. If match is found in database the "Application Status" page will be displayed. If 'Approved' it will be exactly like slide #13. If payment is required is required Slide #17 will be displayed.

# Retrieved Application

## Payment Required -

### Applicant now chooses to 'Pay' option.

## Application Status



## Payment Required

Your application is not complete and will not be processed by CBP until the processing fee has been paid. You must complete payment within 7 days.



[Pay](#)

|                           |                                 |      |  |
|---------------------------|---------------------------------|------|--|
| <b>Application Number</b> | <b>Expiration Date</b>          |      |  |
| RXR97XXRRXHQQK4K          | <b>Day</b>                      | 21   |  |
|                           | <b>Month</b>                    | 1    |  |
|                           | <b>Year</b>                     | 2013 |  |
| <b>Passport Number</b>    | <b>Passport Issuing Country</b> |      |  |
| 90TS86753                 | FRANCE                          |      |  |

[Exit](#)

[Update](#)

## CBP Online Payment

Please enter your credit card information below. Then click the **Submit Payment** button to complete the process.

\* **Mandatory Fields**

Payment Amount (in US currency): **\$14.00**

Account Holder First Name \*  M.I.  Last Name \*

Billing Address \*

Billing Address2

City

Country \*

State/Province

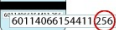
Postal/Zip Code

Credit Card Type \*

Credit Card Number \*  (Value should not contain spaces or dashes)

Expiration Date \*  /

Security Code \*



On the back of your card, find the last 3 digits

[Cancel](#)

[Submit Payment](#)

Selecting 'Pay' option directs user to Online Payment page.

|                           |                                                     |
|---------------------------|-----------------------------------------------------|
| <b>Application Number</b> | <b>Expiration Date</b>                              |
| R9W1R3RXX7AF2K74          | <b>Day</b> 9<br><b>Month</b> 12<br><b>Year</b> 2012 |
| <b>Passport Number</b>    | <b>Passport Issuing Country</b>                     |
| 45LS69873                 | FRANCE                                              |

|                        |                  |
|------------------------|------------------|
| <b>Payment Receipt</b> |                  |
| Payment Date           | December 9, 2010 |
| Payment Tracking Code  | A1B1C1           |
| Payment Received       | \$14.00          |

|      |        |
|------|--------|
| Exit | Update |
|------|--------|

Bottom half of Application Status page showing where applicant selects 'Update'.

Update page is displayed showing corresponding applicant's Passport Number and Passport Issuing Country.

Retrieved Application  
Applicant now chooses the 'Update' option.

|                                                                                                                                                                             |         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
|  <b>U.S. Customs and Border Protection</b><br>Securing America's Borders                   | DHS.gov |
|  <b>Electronic System for Travel Authorization</b><br>U.S. Department of Homeland Security |         |

Update

|                                                                                                                                                                              |                                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Passport Number</b>                                                                                                                                                       | <b>Passport Issuing Country</b>                                                                                                                        |
| 45LS69873                                                                                                                                                                    | FRANCE                                                                                                                                                 |
| You may update any of the following information. Please see <a href="#">Help</a> for information on what to do should other information on your travel authorization change. |                                                                                                                                                        |
| <b>E-Mail Address</b> ?<br><input type="text"/>                                                                                                                              | <b>Telephone Number</b><br><b>Country Code</b> ? -- <input type="text"/><br><b>Number</b> ? <input type="text"/>                                       |
| <b>City Where You are Boarding</b> ?<br><input type="text"/>                                                                                                                 | <b>Carrier Information</b><br><b>Carrier Name</b> ? --Please Select <input type="text"/><br><b>Flight Number or Vessel Name</b> ? <input type="text"/> |
| <b>Address Line 1</b> ?<br><input type="text"/>                                                                                                                              | <b>Address Line 2</b> ?<br><input type="text"/>                                                                                                        |
| <b>City</b> ?<br><input type="text"/>                                                                                                                                        | <b>State</b> ?<br>--Please Select <input type="text"/>                                                                                                 |
| Previous                                                                                                                                                                     | Submit                                                                                                                                                 |

For inquiries or questions regarding this application, please click here.

[Privacy Statement](#) | [www.cbp.gov/travel](http://www.cbp.gov/travel)



## Update

Applicant has filled in two of the updateable fields prior to submitting.

**NOTE:** Passport fields are the only fields displayed which cannot be edited.

Passport Number

45LS69873

Passport Issuing Country

FRANCE

You may update any of the following information. Please see [Help](#) for information on what to do should other information on your travel authorization change.

E-Mail Address ?

Telephone Number

Country Code ?

--

Number ?

City Where You are Boarding ?

PARIS

Carrier Information

Carrier Name ?

L'Avion

Flight Number or Vessel Name ?

1234

Address Line 1 ?

Address Line 2 ?

City ?

State ?

--Please Select

Previous

Submit



## Update

Update Successful.

|                                        |                                     |
|----------------------------------------|-------------------------------------|
| <b>Passport Number</b>                 | <b>Passport Issuing Country</b>     |
| <input type="text" value="45LS69873"/> | <input type="text" value="FRANCE"/> |

You may update any of the following information. Please see [Help](#) for information on what to do should other information on your travel authorization change.

|                                                                            |                                                                                                                                                                     |
|----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>E-Mail Address</b> ?<br><input type="text"/>                            | <b>Telephone Number</b><br><b>Country Code</b> ? <input type="text" value="--"/><br><b>Number</b> ? <input type="text"/>                                            |
| <b>City Where You are Boarding</b> ?<br><input type="text" value="PARIS"/> | <b>Carrier Information</b><br><b>Carrier Name</b> ? <input type="text" value="L'Avion"/><br><b>Flight Number or Vessel Name</b> ? <input type="text" value="1234"/> |
| <b>Address Line 1</b> ?<br><input type="text"/>                            | <b>Address Line 2</b> ?<br><input type="text"/>                                                                                                                     |
| <b>City</b> ?<br><input type="text"/>                                      | <b>State</b> ?<br><input type="text" value="--Please Select"/>                                                                                                      |

Previous

Submit

[For inquiries or questions regarding this application, please click here.](#)

[Privacy Statement](#) | [www.cbp.gov/travel](http://www.cbp.gov/travel)

System  
acknowledges  
updates made  
have been  
successful.

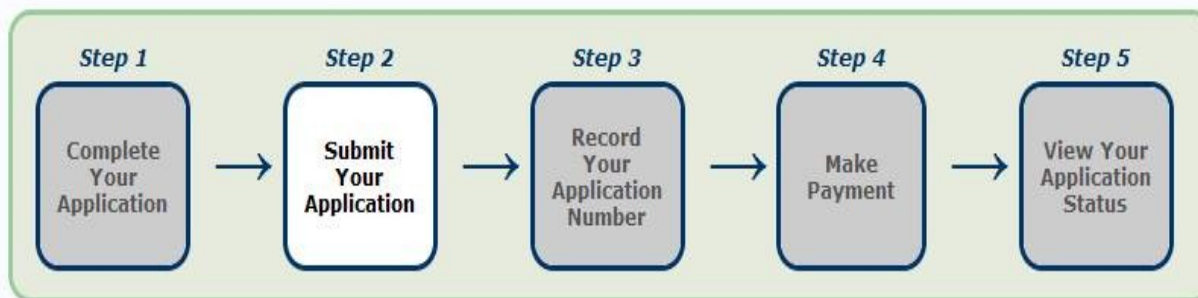
## **Approved Application Found**

### **Matching on Passport Number and Passport Issuing Country**

- Applicant is warned that payment will be required for the new application
- Applicant is required to choose:
  1. Cancel new application. Keep existing application
  2. Continue with new application



## Approved Application Found



A valid, approved application with more than 30 days remaining has been found for this passport. Submitting this application will require payment for this application and will then cancel the existing application.

Would you like to continue?



# U.S. Customs and Border Protection