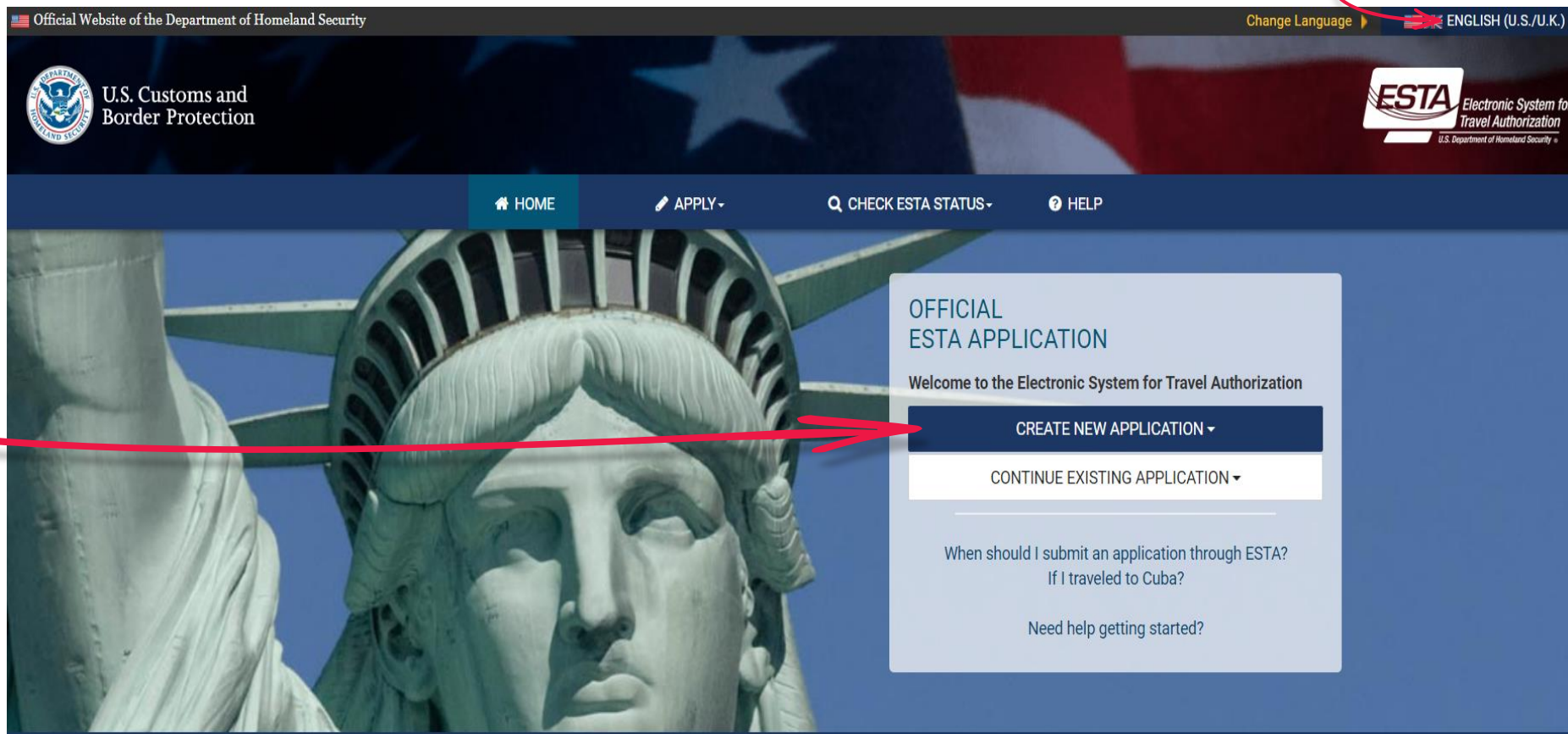


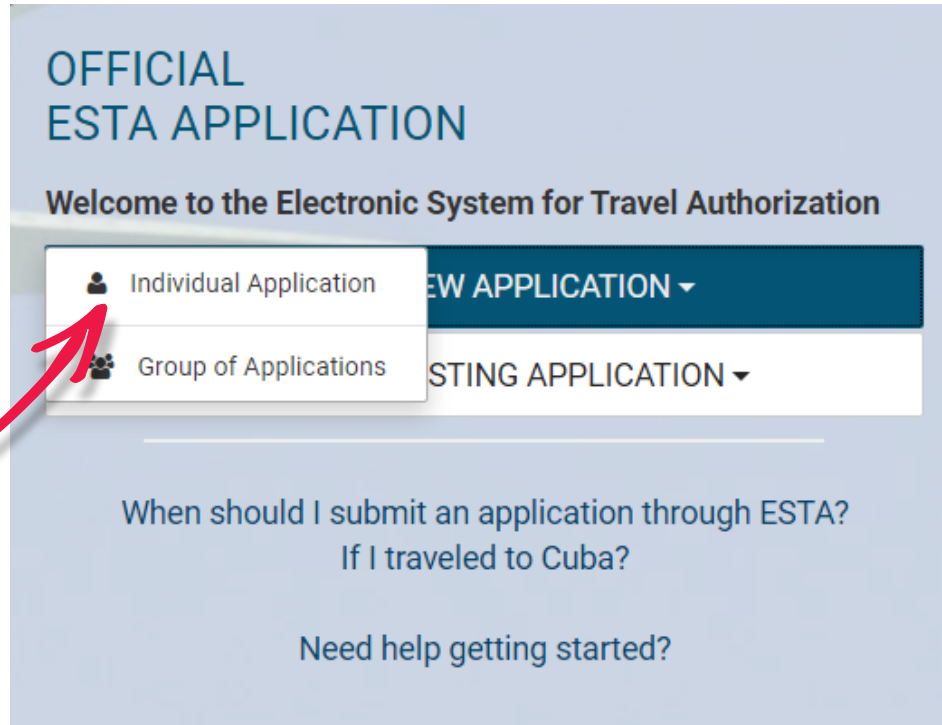
ESTA - USA

Du kan ändra språk, genom att trycka här

För att resa in i USA, så ska du fylla i en 'Electronic System for Travel Authorization' också kallad 'ESTA'.
Börja med att välja 'Create New Application'



Välj därefter 'Individual Application'
Det rekommenderas att fylla i en ansökan
per person.



OFFICIAL
ESTA APPLICATION

Welcome to the Electronic System for Travel Authorization

Individual Application NEW APPLICATION ▾

Group of Applications EXISTING APPLICATION ▾

When should I submit an application through ESTA?
If I traveled to Cuba?

Need help getting started?

Tryck därefter på 'Confirm &
Continue'

subject to monitoring for administrative oversight, law enforcement, criminal investigative purposes, inquiries into alleged wrongdoing or misuse, and to ensure proper performance of applicable security features and procedures. DHS may conduct monitoring activities without further notice.



CANCEL & EXIT

CONFIRM & CONTINUE

Vänligen indikera att du har förstått
upplysningarna, genom att välja 'Yes, I
have read and understand the
information and agree to these terms.'
Detta ska göras 2 gånger.

▼ Disclaimer

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 acknowledgment.

▼ The Travel Promotion Act of 2009

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 acknowledgment.

Tryck därefter på 'NEXT'

NEXT

Innan du kan börja fylla i dina upplysningar så ska du ladda upp en passkopia. Detta görs genom att välja 'Upload your passport'
Formatet kan endast vara 'gif, png, jpg eller jpeg.

UPLOAD YOUR PASSPORT

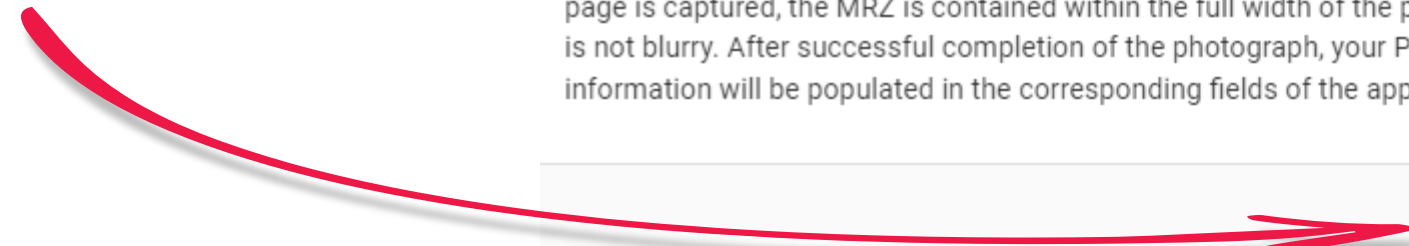
 You must upload your passport to continue with your ESTA Application.

Please ensure you upload the entire Passport biographic page of the traveler applying for an ESTA. The data from the uploaded passport MUST match the identity of the traveler.

Selecting the "UPLOAD YOUR PASSPORT" button will allow you to either select and upload a photo of your Passport's biographic page or use your device camera to scan your Passport's biographic page.

If you choose the 'From gallery' option, then you will be able to select and upload an image of your Passport's biographic page. File types for uploading are limited to gif, png, jpg, and jpeg. After successful completion of the upload, your Passport's biographic information will be populated in the corresponding fields of the application.

If you choose the 'From camera' option, then you will be able to use your device camera to scan your Passport's biographic page. For accurate results, make sure the Passport's entire biographic page is captured, the MRZ is contained within the full width of the photograph and the photograph is not blurry. After successful completion of the photograph, your Passport's biographic information will be populated in the corresponding fields of the application.



UPLOAD YOUR PASSPORT

Om upplysningarna korrekta, så lägger du till dem till din ansökan genom att välja 'Add to my Application'

➤

[illegible]

ADD TO MY APPLICATION CANCEL

ENTER APPLICANT INFORMATION

The following information is required of every non-immigrant visitor not in possession of a visitor's visa who is a national of one of the countries ^[1] 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.
Required fields are indicated by a red asterisk *.

APPLICANT / PASSPORT INFORMATION

Refer to your passport and enter all information in the same format.

Efternavn Family Name *	Fornavn(e) First (Given) Name *
Pasnummer Passport Number *	Udstedelsesland Issuing Country *
Issuance Date * ? Udstedelsesdato Day Month Year	Expiration Date * ? Udløbsdato Day Month Year
Nationalitet Country of Citizenship / Nationality *	National Identification Number
Personal Identification Number	
Køn Sex *	Date of Birth * ? Fødselsdato Day Month Year

📷 UPLOAD YOUR PASSPORT

What is this?

SAMPLE PASSPORT



This sample passport displays the information you will need from applicant's passport. Information must be entered exactly as it appears in passport. Enlarge image to see more information.

Några av fälten är nu ifyllda med dina upplysningar. Nu ska du fylla i resterande fält markerade med en röd stjärna

Är du också medborgare i ett annat land?

Har du varit medborgare i ett annat land?

Yes = Ja
No = Nej

Fødeby

City of Birth *

Fødeland

Country of Birth *

Alla fält med
RÖD ★ måste
fyllas i

OTHER CITIZENSHIP/NATIONALITY

Are you now, a citizen or national of any other country? * ?

☐ Yes ☐ No

Have you ever been a citizen or national of any other country? * ?

☐ Yes ☐ No

i IMPORTANT: Your application number will be sent to the email address entered below. You must verify your email address to complete your application.

E-mail Address *

Confirm E-mail Address *

Emailadress

Bekräfta mailadressen igen

A If you are not able to complete your application now, you can "Save and Exit" and finish at a later date. We will need to verify your email address before we can send you your Application Number to retrieve your application. (If you did not receive a confirmation email, please check your spam folder.)

Note: If your application is not completed within 7 days, it will be deleted.

 SAVE AND EXIT

Step 2 of 7

PREVIOUS

NEXT

När allt är ifyllt, trycker du
på 'Next'

1. VERIFY INFORMATION

Please confirm the below information is correct.

Passport Number *

i Enter your passport number as it appears on your passport. The passport number may contain numbers and/or characters. Please closely distinguish between the number zero and the letter O. The passport number is required to complete the application or to check the status of your application.

CANCEL & EXIT

CONFIRM & CONTINUE

Bekräfta att ditt passnummer är korrekt och tryck på 'Confirm & Continue'

Du kommer att få en 4 siffrig kod på email och den ska fyllas i här för att kunna fortsätta.

Bekräfta att din email är korrekt och tryck på 'Send Code' annars ändrar du email på 'Change email address'

2. EMAIL VERIFICATION

We will send an email to Din emailadresse with a 4 digit code. You will then be prompted to enter the 4 digit code on the next screen.

If your email address is correct, click on "Send Code" to send the email.

If your email address is not correct, click on the "Change Email Address" to update it.

CHANGE EMAIL ADDRESS

SEND CODE

3. ENTER CODE

Please enter the 4 digit code that was sent to you in your email.

CANCEL

RESEND CODE

SUBMIT CODE

När koden är inskriven, så tryck på 'Submit Code'

Alla fält med
RÖD ★ måste
fyllas i

Yes = Ja

No = Nej

Är du känd under andra
namn?

ENTER PERSONAL INFORMATION

Please provide all responses in English.

Required fields are indicated by a red asterisk *.

Are you known by any other names or aliases? * ?

☐ Yes ☐ No

Har du tidigare fått tilldelat ett
pass från ett annat land?

Have you ever been issued a passport or national identity card for travel by any other country? * ?

☐ Yes ☐ No

YOUR CONTACT INFORMATION

Please enter your contact information below.

Hemadress

Address Line 1 *

Address Line 2

Apartment Number

Stad

City *

Provins/Region

State/Province/Region *

Hemland

Country *

Typ av telefon

Telephone Type *

Landskod

Country Code *

Telefonnummer

Phone Number *

 ADD ANOTHER

SOCIAL MEDIA (OPTIONAL)

Please enter information associated with your online presence over the past five years. 
Social Media Frequently Asked Questions.

Facebook Page ID

LinkedIn Profile Link

Twitter User ID

Instagram User ID

Provider / Platform

Social Media Identifier

 ADD ANOTHER☐ I do not have an online presence.**GE/NEXUS/SENTRI MEMBERSHIP**

Are you a member of the CBP Global Entry/NEXUS/SENTRI Program? * 

☐ Yes ☒ No**PARENTS **

Please list your parents names in the boxes to the right. All applicants are required to fill out this section.

Family Name *

Efternamn

First (Given) Name *

Förnamn (alla)

Family Name *

Efternamn

First (Given) Name *

Förnamn (alla)

EMPLOYMENT INFORMATION

Do you have a current or previous employer? * 

☒ Yes ☐ No

Sociala medier fälten
lämnas blankt

Är du Svensk medborgare väljer du
No/Nej

Dina föräldrars namn

Alla fält med
RÖD ★ måste
fyllas i

Har du varit i sysselsättning
tidigare?

Yes = Ja
No = Nej

Alla fält med
RÖD ★ måste
fyllas i

Job Title	Arbetsplatsens namn Employer Name *	
Adress Address Line 1 *	Address Line 2	
Stad City *	Provins/Region State/Province/Region *	Land Country * ▼
Country Code ▼	Phone Number	

SAVE AND EXIT

Step 3 of 7

PREVIOUS

NEXT

När allt är utfyllt, trycker du
på 'Next'



Alla fält med
RÖD ★ måste
fyllas i

TRANSIT

Om du endast ska vara i
TRANSIT i USA, så väljer du
'YES', fyller i kontaktperson och
går vidare till sida 15 .
(Transit är, om du endast
mellanlandar i USA, innan du
flyger vidare till din
slutdestination.)

ENTER TRAVEL INFORMATION

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

Är USA din slutdestination, så väljer du 'No' och
går vidare till nästa sida. (13)

Is your travel to the US occurring in transit to another country? * ?

☒ Yes ☐ No

EMERGENCY CONTACT INFORMATION IN OR OUT OF THE U.S.

Efternamn

Family Name *

Förnamn (alla)

First (Given) Name *

Emailadress

E-mail Address *

Landskod (+46)

Country Code *

Telefonnummer

Phone Number *

Kontaktperson i eller
utanför USA.

 SAVE AND EXIT

Step 4 of 7

PREVIOUS

NEXT

När allt är utfyllt, trycker du på
'Next'

Alla fält med
RÖD ★ måste
fyllas i

Här har du valt att din
slutdestination är USA
genom att trycka på 'No'.

Här kan du vid alla röda
stjärnor med undantag för
'Country Code' och 'Phone
Number' välja 'Unknown'

ENTER TRAVEL INFORMATION

Please provide all responses in English.

Required fields are indicated by a red asterisk *.

Is your travel to the US occurring in transit to another country? * ?

☐ Yes ☒ No

U.S. POINT OF CONTACT INFORMATION

Name *

Address Line 1 *

Address Line 2

Apartment Number

City *

State * ▼

Country Code *

UNITED STATES (USA) (+1) ▼

Phone Number *

Vid 'Country Code' väljer du 'United States (USA)(+1)' och 'Phone Number' 8st nollor (00000000)

Alla fält med
RÖD ★ måste
fyllas i

Här väljer du 'YES' det
samma som 'US point of
contact' på sida 13.

ADDRESS WHILE IN THE U.S.

The address where you will be staying in the U.S. is optional to complete the application. If multiple locations are planned, enter the first address. If the complete address is not known, enter the name of the hotel or location you will visit.

Is your Address While in the U.S. same as the U.S. Point of Contact Address listed above?

☒ Yes ☐ No

Address Line 1

Address Line 2

Apartment Number

City

State

Kontaktperson i eller
utanför USA.

EMERGENCY CONTACT INFORMATION IN OR OUT OF THE U.S.

Efternamn

Family Name *

Förnamn (alla)

First (Given) Name *

Emailadress

E-mail Address *

Ladskod (+46)

Country Code *

Telefonnummer

Phone Number *

När allt är utfyllt, trycker du på
'Next'

 SAVE AND EXIT

Step 4 of 7

PREVIOUS

NEXT

Alla fält med
RÖD ★ måste
fyllas i

ELIGIBILITY QUESTIONS

Need additional guidance on eligibility questions?

Required fields are indicated by a red asterisk *.

1) Do you have a physical or mental disorder; or are you a drug abuser or addict; or do you currently have any of the following diseases (communicable diseases are specified pursuant to section 361(b) of the Public Health Service Act): *

- Cholera
- Diphtheria
- Tuberculosis, infectious
- Plague
- Smallpox
- Yellow Fever
- Viral Hemorrhagic Fevers, including Ebola, Lassa, Marburg, Crimean-Congo
- Severe acute respiratory illnesses capable of transmission to other persons and likely to cause mortality.

☐ Yes ☐ No

2) Have you ever been arrested or convicted for a crime that resulted in serious damage to property, or serious harm to another person or government authority? *

☐ Yes ☐ No

3) Have you ever violated any law related to possessing, using, or distributing illegal drugs? *

☐ Yes ☐ No

Yes = Ja
No = Nej

På de kommande 2 sidorna, ska du svara ärligt på alla frågor, svarar du Ja på några av frågorna, ska du räkna med att inte få din ESTA godkänd.
Kontakta evt.
Albatros/Visumavdelningen för mer information.

Notera fråga 9 på nästa sida.

Alla fält med
RÖD ★ måste
fyllas i

4) Do you seek to engage in or have you ever engaged in terrorist activities, espionage, sabotage, or genocide? *

☐ Yes ☐ No

5) Have you ever committed fraud or misrepresented yourself or others to obtain, or assist others to obtain, a visa or entry into the United States? *

☐ Yes ☐ No

6) Are you currently seeking employment in the United States or were you previously employed in the United States without prior permission from the U.S. government? *

☐ Yes ☐ No

7) Have you ever been denied a U.S. visa you applied for with your current or previous passport, or have you ever been refused admission to the United States or withdrawn your application for admission at a U.S. port of entry? *

☐ Yes ☐ No

8) Have you ever stayed in the United States longer than the admission period granted to you by the U.S. government? *

☐ Yes ☐ No

9) Have you traveled to, or been present in Cuba, Iran, Iraq, Libya, North Korea, Somalia, Sudan, Syria or Yemen on or after March 1, 2011? *

☐ Yes ☐ No

Du ska söka visum på den
amerikanska ambassaden, om du
har varit i några av dessa länder.



Viktigt: Välj JA om du har varit på Kuba efter den 12 januari 2021.

För alla andra länder ska du välja JA om du har varit där efter den 1 mars 2011.

Sätt en bock i rutan för att bekräfta att allt du fyllt i är korrekt.

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.

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.

THIRD PARTIES ONLY:

☐ 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.

 SAVE AND EXIT

Step 5 of 7

PREVIOUS

NEXT

Om du fyller ut formuläret för någon annan så godkänner du, att den du utfyller åt, känner till alla svar och frågor i ansökan.

När du klickat i en av rutorna, så trycker du på 'Next'

REVIEW YOUR APPLICATION

Download  Print 

Please review all information for accuracy before submitting your application. If information is inaccurate, select the "Edit" option in the top right corner of the application review. Select "CONFIRM & CONTINUE" if/when all information is correct.

Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

▼ APPLICANT INFORMATION

Family Name

Issuing Country

Country of Citizenship / Nationality

Sex

Country of Birth

First (Given) Name

Issuance Date

National Identification Number

Date of Birth

Passport Number

Expiration Date

Personal Identification Number

City of Birth

Edit 

Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

OTHER CITIZENSHIP/NATIONALITY

Are you now, a citizen or national of any other country? No

Have you ever been a citizen or national of any other country? No

E-mail Address

Confirm E-mail Address

CONFIRM & CONTINUE

> PERSONAL INFORMATION

EDIT

> TRAVEL INFORMATION

EDIT

> ELIGIBILITY QUESTIONS

EDIT

SAVE AND EXIT

Step 6 of 7

PREVIOUS

NEXT



Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

> APPLICANT INFORMATION

Reviewed ✓

Edit

> PERSONAL INFORMATION

Edit

Are you known by any other names or aliases? No

Have you ever been issued a passport or national identity card for travel by any other country? No

YOUR CONTACT INFORMATION

Address Line 1

Address Line 2

Apartment Number

City

State/Province/Region

Country

Telephone Type

Country Code

Phone Number



Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

SOCIAL MEDIA (OPTIONAL)

N/A

GE/NEXUS/SENTRI MEMBERSHIP

Are you a member of the CBP Global Entry/NEXUS/SENTRI Program? No

PARENTS

Family Name

First (Given) Name

Family Name

First (Given) Name

Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

EMPLOYMENT INFORMATION

Do you have a current or previous employer? Yes

Job Title

Employer Name

Address Line 1

Address Line 2

City

State/Province/Region

Country

Country Code

Phone Number

CONFIRM & CONTINUE

> TRAVEL INFORMATION

Edit

> ELIGIBILITY QUESTIONS

Edit

SAVE AND EXIT

Step 6 of 7

PREVIOUS

NEXT

Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

> APPLICANT INFORMATION		Reviewed ✓	Edit ✎
> PERSONAL INFORMATION		Reviewed ✓	Edit ✎
▼ TRAVEL INFORMATION			Edit ✎
Is your travel to the US occurring in transit to another country? No			
U.S. Point of Contact Information			
Name UNKNOWN			
Address Line 1 UNKNOWN		Address Line 2	Apartment Number
City UNKNOWN		State/Province/Region UNKNOWN	
Country Code UNITED STATES (USA) (+1)		Phone Number 00000000	



Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

Address While in the U.S.

Address Line 1

UNKNOWN

Address Line 2

Apartment Number

City

UNKNOWN

State/Province/Region

UNKNOWN

EMERGENCY CONTACT INFORMATION IN OR OUT OF THE U.S.

Family Name

First (Given) Name

E-mail Address

Country Code

Phone Number

CONFIRM & CONTINUE

> ELIGIBILITY QUESTIONS

Edit

SAVE AND EXIT

Step 6 of 7

PREVIOUS

NEXT

Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

> APPLICANT INFORMATION	Reviewed ✓	Edit ✎
> PERSONAL INFORMATION	Reviewed ✓	Edit ✎
> TRAVEL INFORMATION	Reviewed ✓	Edit ✎
▼ ELIGIBILITY QUESTIONS		Edit ✎
1) Do you have a physical or mental disorder; or are you a drug abuser or addict; or do you currently have any of the following diseases (communicable diseases are specified pursuant to section 361(b) of the Public Health Service Act): • Cholera • Diphtheria • Tuberculosis, infectious • Plague • Smallpox • Yellow Fever • Viral Hemorrhagic Fevers, including Ebola, Lassa, Marburg, Crimean-Congo • Severe acute respiratory illnesses capable of transmission to other persons and likely to cause mortality.		No
2) Have you ever been arrested or convicted for a crime that resulted in serious damage to property, or serious harm to another person or government authority?		No
3) Have you ever violated any law related to possessing, using, or distributing illegal drugs?		No

Läs igenom dina svar. Om något ska ändras så tryck på 'Edit' innan du går vidare, och rätta dina svar. Om allt är korrekt, så tryck på 'Confirm & continue' och fortsätt.

4) Do you seek to engage in or have you ever engaged in terrorist activities, espionage, sabotage, or genocide?	No
5) Have you ever committed fraud or misrepresented yourself or others to obtain, or assist others to obtain, a visa or entry into the United States?	No
6) Are you currently seeking employment in the United States or were you previously employed in the United States without prior permission from the U.S. government?	No
7) Have you ever been denied a U.S. visa you applied for with your current or previous passport, or have you ever been refused admission to the United States or withdrawn your application for admission at a U.S. port of entry?	No
8) Have you ever stayed in the United States longer than the admission period granted to you by the U.S. government?	No
9) Have you traveled to, or been present in Cuba, Iran, Iraq, Libya, North Korea, Somalia, Sudan, Syria or Yemen on or after March 1, 2011?	No

CONFIRM & CONTINUE

 SAVE AND EXIT

Step 6 of 7

PREVIOUS

NEXT

För att verifiera dina upplysningar, så skriv in ditt passnummer, utställandeland, efternamn och födelsedatum.

> APPLICANT INFORMATION	Reviewed ✓	Edit ✎
> PERSONAL INFORMATION	Reviewed ✓	Edit ✎
> TRAVEL INFORMATION	Reviewed ✓	Edit ✎
> ELIGIBILITY QUESTIONS	Reviewed ✓	Edit ✎
> VERIFICATION		
For verification purposes, please re-enter the following information, as shown on your ESTA-eligible passport.		
Passport Number *	Issuing Country *	
Passnummer	Utställandeland	
Family Name *	Date of Birth * ?	Födelsedatum
Efternamn		

SAVE AND EXIT

Step 6 of 7

PREVIOUS

NEXT

När allt är utfyllt, trycker du på 'Next'

PAY NOW AND COMPLETE APPLICATION

Download  Print 

This application is not yet complete and will not be processed until after the application fee is paid in full.

Required fields are indicated by a red asterisk*.

Name	Date of Birth	Application Number	Passport Number	Status
.				Unpaid  Update  View

NOT READY TO PAY?

You will need the above information (**Date of Birth, Application Number, and Passport Number**) in order to make a payment, if you choose not to pay now.

Select "Print" to print your application information, and "Download" to download a PDF of your application information. Your application will not be reviewed until a payment is made.

PAYMENT DUE BY: March 4, 2024

Note: If unpaid, your application will be deleted after this date.

To exit this page, please close your browser window.

PAYMENT SUMMARY

Application Fee: US 
of Applications: x [1]

TOTAL DUE: US 

☐ **DISCLAIMER *** 

I understand that a request by the cardholder to the bank or PayPal for a refund of the fees will result in an automatic denial of the application.

PAY NOW

Om allt stämmer, klicka i rutan och tryck på 'Pay Now'

Electronic System for Travel Authorization (ESTA)

Välj din betalningsform.

Payment Information

Payment Amount [REDACTED]

I want to pay with my

- ☐ PayPal account
- ☐ Debit or credit card

Har du ett PayPal konto väljer du denna.

Har du ett Debit eller Kreditkort väljer du denna

Continue

[Cancel](#)

Tryck därefter 'Continue'

Electronic System for Travel Authorization (ESTA)

Please provide the payment information below. Required fields are marked with an *

Agency Tracking ID

414332665

Payment Amount

* Cardholder Name

Namn på kortet

* Cardholder Billing Address

Fakturaadress

Billing Address 2

City

Stad

Land	* Country Select Country
	State/Province
	ZIP/Postal Code
Kortnummer	* Card Number 
Utlöpsdatum + -år	* Expiration Date Select ... Select ...
Säkerhetskod	* Security Code What's this?
Tryck därfter 'Continue'	Continue Previous Cancel

Electronic System for Travel Authorization (ESTA)

Please review the payment information. Required fields are marked with an *

Agency Tracking ID

Payment Amount



Payment Method

Plastic Card

Cardholder Name

Card Type

Card Number

Cardholder Billing Address

Billing Address 2

City

Country

State/Province

ZIP/Postal Code

Kontrollera om alla dina
uppgifter är korrekta.

Om dina kortsuppgifter är korrekta, klickar du i
rutan för att godkänna betalningen.

☐

* I authorize a charge to my card account for the above amount in accordance with my card issuer agreement.

Tryck 'Continue' för att fortsätta

Continue

Previous

[Cancel](#)

Din betalning är nu igång och det kan ta ca. 30 sek.

 U.S. Customs and Border Protection

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

[HOME](#) [APPLY](#) [CHECK ESTA STATUS](#) [HELP](#)

YOUR PAYMENT IS BEING PROCESSED.

It could take a few minutes. Please wait.



25

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

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Have additional questions? [VIEW ALL TOPICS](#)

Din betalning har nu gått igenom och din status är:
'Authorization Pending', dvs. myndigheterna ska nu se igenom den innan de godkänner den.

När din ESTA är godkänd kommer du få en email och då kan du skriva ut den och ta med den på din resa.

AUTHORIZATION PENDING

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Your travel authorization is under review because an immediate determination could not be made. This response does not indicate negative findings. A determination will be available within 72 hours. Return to this website to retrieve and view the ESTA status of a previously submitted authorization for one or for a group of two or more persons.

YOUR PAYMENT HAS BEEN SUBMITTED

You have successfully submitted payment for the application listed below. A request by the cardholder to the bank or PayPal for a refund of fees will result in an automatic denial of the application. Please print this page for your personal records.

Name	Date of Birth	Application Number	Passport Number	Status	Expires
				Authorization Pending	N/A
				View	

PAYMENT SUMMARY

Payment Received:

Payment Date:

Payment Tracking Code:



DHS recommends you print this screen for your records.

You will not receive a separate notification about whether or not your application was approved. To retrieve an application and find the disposition, select "Check ESTA Status" from the global navigation menu or home page. For additional guidance, select "How do I retrieve my application?" from the Help section of this website.

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