



Welcome to the Electronic Ticket portal for entering and leaving the Dominican Republic

[ENTER TO THE FORM](#)

WHAT IS THE ELECTRONIC TICKET ?

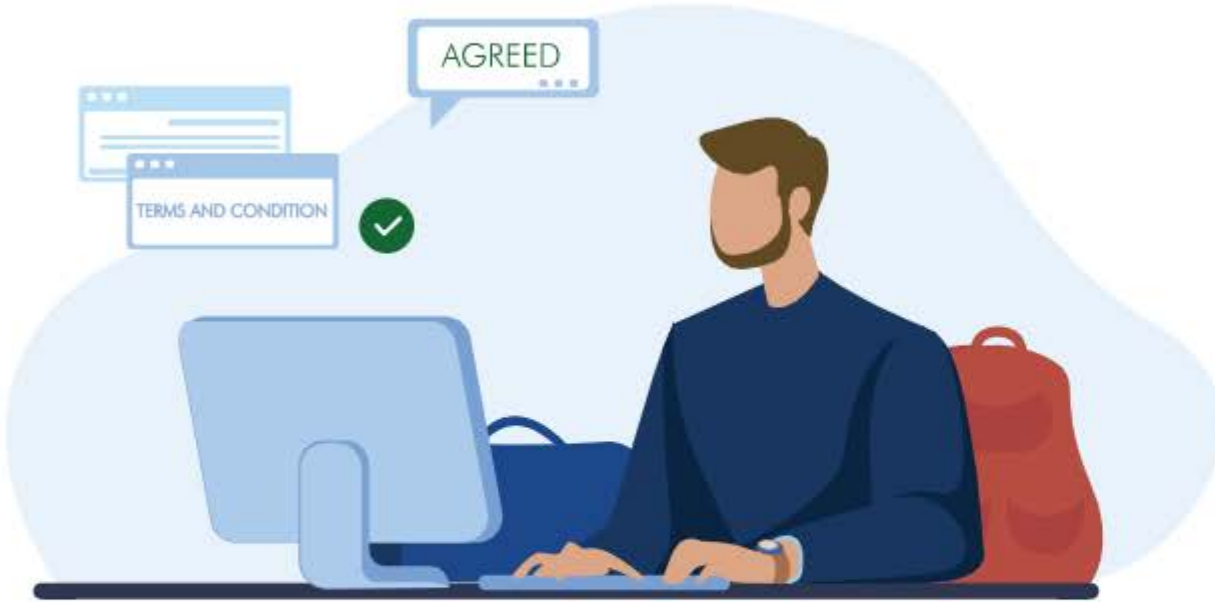
It is a digital form required by multiple institutions for entering or leaving the national territory.

It is mandatory for each passenger to truthfully complete the information on the electronic Ticket for the General Immigration Office, the General Customs Office and the Ministry of Public Health, according to dominican laws 285-04, 115-17, 72-02 and 226-06.

E-TICKET APPLICATION ?

APPLY

ACCESS TO FORM



DOWNLOAD TRAVELER
MANUAL [SEE HERE](#)

SELECT A SECURITY QUESTION

What is your favorite food? ▼

RESPONSE

carbonara paste

ARE YOU TRAVELING WITH SOMEONE ELSE?

NO YES

I'm not a robot



SUBMIT

CANCEL

APPLICATION CODE : SKR5L3

THIS IS YOUR APPLICATION CODE TO ACCESS THE FORM, PLEASE
SAVE IT SECURELY AND DONT SHARE WITH ANYONE.

[LOGOUT](#)

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GENERAL INFORMATION

2

MIGRATORY INFORMATION

3

CUSTOMS INFORMATION

4

PUBLIC HEALTH

GENERAL INFORMATION

PERMANENT ADDRESS

Ave. Valeriya Lobanovskogo 6a

COUNTRY OF RESIDENCE

Ukraine

CITY

Kyiv

[CLICK HERE TO SELECT](#)

MODE OF TRANSPORTATION

Air Transport

ARRIVAL TO THE DOMINICAN REPUBLIC

DEPARTURE FROM DOMINICAN REPUBLIC

STATE / (ex: New York)

Kiev

POSTAL CODE

03037

DO YOU MAKE STOPS IN OTHER COUNTRIES?

NO YES

[NEXT](#)



GENERAL INFORMATION

2

MIGRATORY INFORMATION

3

CUSTOMS INFORMATION

4

PUBLIC HEALTH



MIGRATORY INFORMATION

PASSENGER 1

NAMES

Olha

LAST NAMES

Ivanova

DATE OF BIRTH

08/11/1997

GENDER

FEMENINE

PLACE OF BIRTH

Ukraine

COUNTRY OF NATIONALITY

Ukraine

PASSPORT

FH111111

CONFIRM PASSPORTE

FH111111

CIVIL STATUS

Married

OCUPATION

Doctor

ARE YOU GOING TO STAY AT A HOTEL?

NO YES

HOTEL

Hotel Bahia Principe Bavaro

[CLICK HERE TO SELECT](#)

NAME OF THE BOARDING PORT

Boryspil International Airport

[CLICK HERE TO SELECT](#)

FLIGHT NUMBER

PS 2205

FLIGHT DATE

14/02/2021

DISEMBARKATION PORT

LRM - AEROPUERTO INTERNACIONAL LA ROMANA

FLIGHT NUMBER

PS 2205

MOTIVE

Others

TRANSPORTATION COMPANY

Ukraine International Airlines

DAYS OF STAYING

12

SPECIFY MOTIVE OF STAYING

Travel

PREVIOUS STEP

NEXT



GENERAL INFORMATION



MIGRATORY INFORMATION



CUSTOMS INFORMATION



PUBLIC HEALTH

OLHA



CUSTOMS INFORMATION

DO YOU BRING OR BRING WITH YOU OR IN YOUR LUGGAGE (S), YOU AND / OR YOUR FAMILY MEMBERS, CURRENCY VALUES OR ANOTHER PAYMENT INSTRUMENT, AN AMOUNT IN EXCESS OF USD \$ 10,000.00 OR ITS EQUIVALENT IN ANOTHER (S) TYPE (S) OF CURRENCY (S)? NO YES

ARE YOU THE OWNER OF THE VALUES YOU CARRY? NO YES

DO YOU BRING WITH YOU OR IN YOUR LUGGAGE LIVE ANIMALS, PLANTS OR FOOD PRODUCTS? NO YES

DO YOU BRING WITH YOU OR IN YOUR BAGGAGE GOODS SUBJECT TO TAX PAYMENT? NO YES

NOTE: THE PRESENTATION OF THIS DECLARATION IS MANDATORY FOR ALL PASSENGERS WHO LEAVE OR ENTER THE DR. FOR MINORS, THIS FORM MUST BE COMPLETED AND SIGNED BY THE RESPONSIBLE ADULT. THE DECLARATION OF INFORMATION FAULTS OR INCOMPLETES MAY ORIGINATE PENALTIES SUCH AS SEIZURES OF SECURITIES, OF GOODS AND DEPRIVATION OF FREEDOM, ACCORDING TO ARTICLE 200 OF LAW 3489, OF CUSTOMS REGIME, AND ARTICLE 4 OF LAW NO. 155-17 AGAINST WASHING ASSETS. THIS DECLARATION MUST BE SIGNED BY THE PASSENGER WHERE IT IS INDICATED

PREVIOUS STEP

NEXT



PUBLIC HEALTH

OLHA

TRANSIT COUNTRIES BEFORE ARRIVING IN THE DOMINICAN REPUBLIC 

COUNTRIES VISITED IN THE LAST 30 DAYS 

DECLARATION OF SIGNS AND SYMPTOMS

IN THE LAST 72 HOURS HAVE YOU PRESENTED ONE OR MORE OF THE FOLLOWING SYMPTOMS?

- | | | | |
|--|--------------------------------------|---|---|
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> Sore throat | <input type="checkbox"/> Muscle pain | <input type="checkbox"/> Headache |
| <input type="checkbox"/> Runny nose | <input type="checkbox"/> Cough | <input type="checkbox"/> Shaking chills | <input type="checkbox"/> Breathing difficulty |
| <input type="checkbox"/> Fatigue | <input type="checkbox"/> Fever | | |

DECLARATION OF SIGNS AND SYMPTOMS

IN THE LAST 72 HOURS HAVE YOU PRESENTED ONE OR MORE OF THE FOLLOWING SYMPTOMS?

- None
- Runny nose
- Fatigue
- Sore throat
- Cough
- Fever
- Muscle pain
- Shaking chills
- Headache
- Breathing difficulty

SPECIFY

PHONE NUMBER

38050554433

PREVIOUS STEP

SUBMIT



Has anyone helped you fill out this form ?

Yes

Not



Accept Terms



I declare to the competent authorities that the data provided are true and I submit to the sanctions established by law to check any false information.



I declare to the competent authorities that the information provided is true and I submit to the penalties established by law for checking any false information.



I declare that the information provided here is true and I accept that the false declaration by me is considered a violation of national health regulations.

OK

Cancel



REPUBLICA DOMINICANA

EMBARKATION AND DISEMBARKATION TICKET FROM THE DOMINICAN REPUBLIC

NAME: OLHA IVANOVA

PASSPORT: FH111111

NATIONALITY: UKR

EMISSION DATE: 11/02/2021

MIGRATORY: ENTRADA



EXIT

GENERATE PDF