



VIP PASSPORT SERVICES, INC.

2012 Louisiana Street
Houston, Texas 77002

713-659-8472 1-800-856-8472 Fax 713-659-3767

Website: www.vippassports.com Email: info@vippassports.com

ATTENTION:

**BEGINNING OCTOBER 1ST, 2015, WE WILL NO LONGER
OFFER 9 – 15 DAY SERVICE ON FIRST-TIME PASSPORT CARD
REQUESTS.**

**ALL REQUESTS MUST INCLUDE PROOF OF DEPARTURE
(*ITINERARY, TICKET, COMPANY LETTER OF EXPEDITE*)
SHOWING A DEPARTURE DATE WITHIN 14 DAYS (*IF NO VISA
IS NEEDED*) OR 28 DAYS (*IF VISA IS NEEDED*).**

**DUE TO THE SUBMISSION LIMITATIONS ENFORCED BY THE
U.S. PASSPORT AGENCY, ALL FIRST-TIME PASSPORT
REQUESTS REQUIRE A RESERVATION. PLEASE BE SURE TO
EMAIL ([INFO@VIPPASSPORTS.COM](mailto:info@vippassports.com)) COPIES OF ALL
DOCUMENTS TO OUR OFFICE FOR REVIEW AND TO HAVE
THE APPLICANT'S NAME ADDED TO THE SUBMISSION
RESERVATION LIST.**

THANKS,

VIP PASSPORT SERVICES, INC.

Specializing in Visas, Passports, Document Legalization and Translations



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WORK ORDER REQUEST FORM

(RETURN THIS FORM WITH EACH REQUEST)

BILLING INFORMATION:

CONTACT: _____

COMPANY: _____

ADDRESS: _____

CITY/ZIP: _____

PHONE: _____

CELL: _____

FAX: _____

EMAIL: _____

CREDIT CARD INFORMATION:

CARD#: _____

EXP. DATE: _____ CVV#: _____

**SIGNATURE OF CARD HOLDER
REQUIRED:** _____

RETURN DOCUMENTS TO:

CONTACT: _____

COMPANY: _____

ADDRESS: _____

CITY/ZIP: _____

PHONE: _____

CELL: _____

FAX: _____

EMAIL: _____

BILLING INSTRUCTIONS:

YOUR P.O. OR REF#: _____

**AUTHORIZED AMOUNT TO CHARGE MY
CREDIT CARD: US\$** _____

CHECK THE PASSPORT PROCESSING SERVICE REQUESTED:

SAME DAY EMERGENCY PROCESS _____

3 TO 4 DAY RUSH PROCESS _____

5 TO 8 DAY RUSH PROCESS _____

TRAVELERS NAME: _____

DATE OF USA DEPARTURE: _____

DATE OF BIRTH: _____

DATE YOU NEED PASSPORT: _____

VIP RESERVATION/FILE LOCATOR NUMBER: _____

SPECIAL INSTRUCTIONS: _____

HOW DID YOU HEAR ABOUT VIP: REFERRAL__ INTERNET__ REPEAT CLIENT__ OTHER__

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PASSPORT CARD (CARD ONLY) **MINORS - UNDER 16 YEARS OLD**

DOCUMENTS REQUIRED:

****ONE SEALED ENVELOPE, SEE NEXT PAGE FOR DETAILS****

PLEASE FORWARD THIS SHEET AND ALL ITEMS LISTED TO VIP SERVICES

FEES PER PERSON

GOVERNMENT EXPEDITING FEE:	<u>INSIDE</u>
ADD VIP SERVICE FEE: (SEE BELOW)	<u> </u>
STATE DEPARTMENT FEE:	<u>INSIDE</u>
SUBTOTAL:	<u> </u>
*ADD RETURN FEDERAL EXPRESS FEE:	<u> </u>
TOTAL: (NO PERSONAL CHECKS)	<u> </u>

***FEDERAL EXPRESS FEES**

PRIORITY LETTER	<u>\$29.00</u>
2-DAY LETTER	<u>\$23.50</u>
3-DAY LETTER	<u>\$19.50</u>
SATURDAY LETTER	<u>\$41.50</u>
FED EX 1 ST OVERNIGHT	<u>\$75.00</u>
LOCAL P/UP OR DLVY	<u>CLICK HERE FOR QUOTE</u>

VIP SERVICES FEES:

PLEASE MARK THE APPROPRIATE BOX AND ADD THE FEES
ABOVE FOR THE SERVICE (S) YOU HAVE REQUESTED:

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> \$95.00 | 5 TO 8 DAY RUSH – RESERVATION REQUIRED |
| <input type="checkbox"/> \$145.00 | 3 TO 4 DAY RUSH – RESERVATION REQUIRED |
| <input type="checkbox"/> \$195.00 | SAME DAY RUSH – RESERVATION REQUIRED |

IMPORTANT NOTE: PLEASE BE ADVISED THAT THE U.S. PASSPORT OFFICE ISSUES PASSPORTS ACCORDING TO YOUR DEPARTURE DATE. A PROCESSING TIME OF 8 DAYS OR LESS IS NOT ALWAYS AVAILABLE AND RESERVATIONS ARE REQUIRED. OUR COMPANY IS ALLOWED TO SUBMIT APPLICATIONS TO THE PASSPORT OFFICE EACH DAY BEFORE 8:15 AM. IN THE EVENT YOU ARE REQUESTING THAT YOUR APPLICATION BE SUBMITTED THE DAY WE RECEIVE IT, PLEASE SEND YOUR APPLICATION BY PERSONAL DELIVERY OR BY AN OVERNIGHT COURIER THAT OFFERS AN 8:00 A.M. DELIVERY. ****IF YOU ARE REQUESTING A RESERVATION FOR A PROCESSING OF LESS THAN 8 BUSINESS DAYS PLEASE EMAIL A COPY OF ALL YOUR DOCUMENTS TO [INFO@VIPPASSPORTS.COM](mailto:info@vippassports.com) AND THEN CALL OUR OFFICE SO THAT WE MAY REVIEW THE DOCUMENTS, ADD YOUR NAME TO THE RUSH PROCESS LIST AND GIVE YOU SHIPPING INSTRUCTIONS. YOU WILL BE GIVEN A VIP RESERVATION/FILE LOCATOR NUMBER TO HOLD YOUR PLACE IN THE LINEUP FOR VIP TO SUBMIT YOUR APPLICATION ACCORDINGLY. BE SURE TO LIST THE RESERVATION NUMBER ON THE WORK ORDER. FAILURE TO FOLLOW ANY OF THESE INSTRUCTIONS WILL CAUSE A DELAY.** VIP SERVICES IS NOT RESPONSIBLE FOR DELAYS BEYOND OUR CONTROL. IF IN EVENT THE PASSPORT OFFICE DENIES YOUR APPLICATION, VIP SERVICE FEES ARE NON-REFUNDABLE AND WILL BE CHARGED ACCORDING TO ORIGINAL REQUEST. AFTER THE APPLICATION HAS BEEN SUBMITTED TO THE PASSPORT OFFICE AND THEY PUT THE APPLICATION INTO SUSPENSE THERE WILL BE AN ADDITIONAL VIP SERVICE FEE OF \$37.50 TO SUBMIT THE ADDITIONAL DOCUMENTS AND MONITOR THE PROCESS UNTIL COMPLETION.

REVISED: 9-28-2015 (JENN)

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PASSPORT CARD (CARD ONLY) ***MINORS – UNDER 16 YEARS OLD***

PLEASE FOLLOW THESE INSTRUCTIONS IF:

THE APPLICANT IS UNDER THE AGE OF (16) SIXTEEN.

TAKE THE BELOW MENTIONED DOCUMENTS TO AN ACCEPTANCE AGENT. [CLICK HERE](#) TO FIND YOUR LOCAL ACCEPTANCE AGENT NEAREST YOU. REQUEST THE AGENT EXECUTE YOUR DOCUMENTS AND PLACE THEM IN A SEALED ENVELOPE. ADVISE THE AGENT THAT YOU ARE HAVING VIP SERVICES WALK YOUR PASSPORT APPLICATION THROUGH THE STATE DEPARTMENT. SEALED ENVELOPES MUST BE PRESENTED TO THE STATE DEPARTMENT WITHIN (5) FIVE WORKING DAYS OF BEING SEALED.

- 1.) [CLICK HERE](#) TO COMPLETE THE GOVERNMENT PASSPORT APPLICATION (FORM DS-11) ONLINE. ONCE YOU HAVE COMPLETED THE FORM, YOU MUST PRINT OUT THE APPLICATION BY FIRST CLICKING ON THE CREATE FORM BUTTON. **FAILURE TO DO SO WILL CAUSE A DELAY.** DO NOT SIGN THE APPLICATION UNTIL ASKED TO DO SO BY THE ACCEPTANCE AGENT. BOTH PARENTS OR THE CHILD'S LEGAL GUARDIANS' SIGNATURE WILL ALSO BE REQUIRED.
- 2.) **ONE (1) COLOR PASSPORT TYPE PHOTOGRAPH** (2x2). THE HEAD IS MEASURED FROM BOTTOM OF CHIN TO THE TOP OF THE HAIRLINE AND SHOULD BE BETWEEN 1 INCH AND 1 3/8 INCHES, TAKEN WITHIN THE PAST (3) THREE MONTHS. BE SURE THAT THE PHOTOGRAPH IS TAKEN WITH AN OFF-WHITE BACK GROUND AND BOTH EARS CAN BE SEEN. PLEASE [CLICK HERE](#) FOR MORE GUIDANCE ON PHOTO SPECIFICATIONS.
- 3.) **ORIGINAL CERTIFIED LONG FORM BIRTH CERTIFICATE*** SHOWING THE APPLICANTS PARENT(S) FULL NAME LISTED ON THE CERTIFICATE ISSUED BY THE STATE WHERE YOU WERE BORN. IN ADDITION TO THIS, CERTIFIED COPIES MUST ALSO INCLUDE THE FOLLOWING:
 - APPLICANTS FULL NAME
 - DATE & PLACE OF BIRTH
 - RAISED, EMBOSSED, IMPRESSED OR MULTICOLORED SEAL OR ISSUING AUTHORITY
 - REGISTRAR'S SIGNATURE
 - DATE THE CERTIFICATE WAS FILED WITH THE REGISTRAR'S OFFICE (MUST BE WITHIN ONE YEAR OF DATE OF BIRTH)

* NATURALIZED CITIZENS WILL USE THEIR **NATURALIZATION** CERTIFICATE IN LIEU OF A BIRTH CERTIFICATE.

4.) **PASSPORT CARD FEES:**

\$75.00 PAYABLE TO THE "DEPARTMENT OF STATE",
(\$15.00 CARD FEE + \$60.00 EXPEDITE FEE = \$75.00)
PLUS A \$25.00 EXECUTION FEE.

CONTACT THE ACCEPTANCE AGENT FOR METHOD OF PAYMENT.

CONTINUED →



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- 5.) BOTH PARENTS OR THE CHILD'S LEGAL GUARDIAN(S) WILL BE REQUIRED TO SHOW THEIR DRIVER'S LICENSE OR STATE ISSUED I.D. IF THE LEGAL GUARDIAN(S) CANNOT PROVIDE ACCEPTABLE IDENTIFICATION, THEY WILL BE REQUIRED TO PRESENT AS MANY DOCUMENTS AS POSSIBLE DATING BACK AT LEAST (5) FIVE YEARS TO SUBSTANTIATE THEIR IDENTITY.
- 6.) **PROOF OF DEPARTURE** – ALL SUBMISSIONS MUST BE ACCOMPANIED BY PROOF OF DEPARTURE SHOWING A U.S. DEPARTURE DATE WITHIN 14 DAYS (IF NO VISA IS NEEDED) OR 28 DAYS (IF VISA IS NEEDED). SUBMIT ONE OF THE FOLLOWING **INSIDE** YOUR SEALED ENVELOPE:
 - A CONFIRMED ITINERARY
 - A COPY OF YOUR AIRLINE TICKETS
 - AN ORIGINAL COMPANY LETTER OF EXPEDITE
- 7.) **LETTER OF AUTHORIZATION** - YOU MUST COMPLETE AND INCLUDE TWO COPIES OF THE RELEASE LETTER AUTHORIZING VIP SERVICES TO COLLECT THE PASSPORT ON YOUR BEHALF. THE RELEASE LETTER MUST BE SIGNED AND DATED BY BOTH PARENTS OR LEGAL GUARDIAN(S). ONE COPY OF THIS LETTER, WITH ORIGINAL SIGNATURE IN BLUE INK, SHOULD BE PLACED INSIDE THE SEALED ENVELOPE BY THE PASSPORT ACCEPTANCE AGENT AND THE OTHER SHOULD BE ATTACHED TO THE OUTSIDE OF THE ENVELOPE. IF A RELEASE LETTER IS **NOT** INCLUDED **INSIDE** THE SEALED ENVELOPE, THE PASSPORT WILL BE MAILED TO THE ADDRESS LISTED ON THE APPLICATION.
- 8.) **ONE (1) ORIGINAL, NOTARIZED DS-3053** FORM IF ONE PARENT/LEGAL GUARDIAN CANNOT APPEAR WITH THE CHILD AT THE ACCEPTANCE AGENT.
- 9.) **ONE (1) ORIGINAL DS-5525** FORM IF THE NON-APPEARING PARENT CANNOT BE LOCATED.

*******VERY IMPORTANT*******

WE ARE UNABLE TO SUBMIT YOUR SEALED APPLICATION TO THE DEPARTMENT OF STATE WITHOUT HAVING A COPY OF WHAT IS ENCLOSED IN THE ENVELOPE. WE CANNOT OPEN A SEALED ENVELOPE SO PLEASE BE SURE A COPY OF ALL REQUIRED DOCUMENTS ARE MADE PRIOR TO GOING TO AN ACCEPTANCE AGENT AND INCLUDE THOSE COPIES ALONG WITH YOUR SEALED ENVELOPE.

CONTINUED→



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ITEMS THAT MUST BE INSIDE THE SEALED ENVELOPE

- 1.) PASSPORT APPLICATION FORM DS-11 THAT WAS COMPLETED ONLINE AND WITNESSED BY THE PASSPORT ACCEPTANCE AGENT
- 2.) PASSPORT TYPE COLOR PHOTO (1)
- 3.) CERTIFIED COPY OF BIRTH CERTIFICATE OR NATURALIZATION CERTIFICATE
- 4.) \$75.00 PAYMENT (PAYABLE TO THE "DEPARTMENT OF STATE")
- 5.) ORIGINAL NOTARIZED DS-3053 FORM (*WHEN APPLICABLE*)
- 6.) ORIGINAL DS-5525 FORM (*WHEN APPLICABLE*)
- 7.) ORIGINAL LETTER OF AUTHORIZATION
- 8.) COPY OF BOTH PARENTS ID'S
- 9.) PROOF OF DEPARTURE

FOR MORE DETAILED INSTRUCTIONS ON THE ITEMS REQUIRED, PLEASE SEE THE THREE PREVIOUS PAGES.

ITEMS THAT MUST BE OUTSIDE THE SEALED ENVELOPE

- 1.) COMPLETED VIP WORK ORDER REQUEST FORM
- 2.) COMPLETED VIP PASSPORT INSTRUCTION SHEET
- 3.) A COPY OF THE DS-11 THAT HAS BEEN COMPLETED ONLINE PRIOR TO HAVING THE APPLICANTS SIGNATURE WITNESSED (FAILURE TO DO SO WILL CAUSE A DELAY)
- 4.) COPY OF DS-5525 FORM (*WHEN APPLICABLE*)
- 5.) COPY OF DS-3053 FORM (*WHEN APPLICABLE*)
- 6.) COPY OF LETTER OF AUTHORIZATION
- 7.) COPY OF PROOF OF DEPARTURE
- 8.) VIP PAYMENT (PERSONAL CHECKS ARE NOT ACCEPTED)

FOR MORE DETAILED INSTRUCTIONS ON THE ITEMS REQUIRED, PLEASE SEE THE THREE PREVIOUS PAGES.

IMPORTANT NOTE: PLEASE BE ADVISED THAT THE U.S. PASSPORT OFFICE ISSUES PASSPORTS ACCORDING TO YOUR DEPARTURE DATE. ALL SUBMISSIONS MUST BE ACCOMPANIED BY PROOF OF DEPARTURE SHOWING A U.S. DEPARTURE DATE WITHIN 14 DAYS (IF NO VISA IS NEEDED) OR 28 DAYS (IF VISA IS NEEDED). RESERVATIONS ARE MADE ON A FIRST-COME, FIRST-SERVE BASIS AND ARE NOT ALWAYS AVAILABLE FOR APPLICANTS WHO DO NOT SEND OVER THEIR DOCUMENTS TO REVIEW PRIOR TO SENDING IN THEIR ORIGINALS. OUR COMPANY IS ALLOWED TO SUBMIT APPLICATIONS TO THE PASSPORT OFFICE EACH DAY BEFORE 8:15 AM. IN THE EVENT YOU ARE REQUESTING THAT YOUR APPLICATION BE SUBMITTED THE DAY WE RECEIVE IT, PLEASE SEND YOUR APPLICATION BY PERSONAL DELIVERY OR BY AN OVERNIGHT COURIER THAT OFFERS AN 8:00 A.M. DELIVERY. **TO REQUEST A RESERVATION PRIOR TO SENDING IN ALL ORIGINAL DOCUMENTATION, PLEASE EMAIL A COPY OF ALL DOCUMENTS TO [INFO@VIPPASSPORTS.COM](mailto:info@vippassports.com), THEN CALL OUR OFFICE SO THAT WE MAY REVIEW THE DOCUMENTS, ADD YOUR NAME TO THE RUSH PROCESS LIST AND GIVE YOU SHIPPING INSTRUCTIONS. YOU WILL BE GIVEN A VIP RESERVATION/FILE LOCATOR NUMBER TO HOLD YOUR PLACE IN THE LINEUP FOR VIP TO SUBMIT YOUR APPLICATION ACCORDINGLY. BE SURE TO LIST THE RESERVATION NUMBER ON THE WORK ORDER. FAILURE TO FOLLOW ANY OF THESE INSTRUCTIONS WILL CAUSE A DELAY.** VIP SERVICES IS NOT RESPONSIBLE FOR DELAYS BEYOND OUR CONTROL. IF IN EVENT THE PASSPORT OFFICE DENIES YOUR APPLICATION, VIP SERVICE FEES ARE NON-REFUNDABLE AND WILL BE CHARGED ACCORDING TO ORIGINAL REQUEST. AFTER THE APPLICATION HAS BEEN SUBMITTED TO THE PASSPORT OFFICE AND THEY PUT THE APPLICATION INTO SUSPENSE THERE WILL BE AN ADDITIONAL VIP SERVICE FEE OF \$37.50 TO SUBMIT THE ADDITIONAL DOCUMENTS AND MONITOR THE PROCESS UNTIL COMPLETION.

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Letter of Authorization

Please carefully read the information below before completing this Letter of Authorization.

An individual's personal information cannot be released by the U.S. government to another party without the written consent of the individual under the provisions of the Privacy Act of 1974 (5 USC 552a). As a result, an employee at a U.S. passport agency cannot discuss the details of your passport application with a third party without your written consent.

Please check **all** that apply:

- ☒ I authorize the company stated below to submit my passport application to a passport agency and pick up the passport from a U.S. passport agency on my behalf.
- ☒ I authorize the passport agency to disclose to the company listed below any requests for further documentation and/or information that that may arise in connection with my passport application, and I authorize the company to respond to such requests under my direction.
- ☐ I do not authorize the passport agency to disclose to the company listed below any requests for further documentation and/or information that may arise with my passport application. I want the passport agency to contact me directly should an issue arise with my passport application that concerns matters other than the date on which the passport will be ready for pick-up from the passport agency.

Applicant Information

(Note: All of the information below may ONLY be filled out by the applicant, parent, legal guardian, or person legally acting in loco parentis)

Applicant Name: _____
(Last Name, First Name, Middle Name)

Applicant Phone No: _____ Date: _____
(Area Code-XXX-XXXX) (MM/DD/YYYY)

Courier Company Name: VIP Passport Services, Inc.

Applicant Signature: _____
(If the applicant is under the age of 16 the parent(s), legal guardian(s), or person legally acting in loco parentis must sign)

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INDIVIDUAL LETTER OF EXPEDITE

EXAMPLE

**PLEASE FOLLOW THIS FORMAT IF YOU WILL BE TRAVELING
AS AN INDIVIDUAL.**

(DATE)

DEAR PASSPORT REPRESENTATIVE

I, MR./MRS. (NAME) HAVE AN URGENT INTERNATIONAL DEPARTURE TO
(DESTINATION) FOR THE PURPOSE OF (REASON FOR TRAVEL). I WILL BE
DEPARTING THE U.S.A. ON (DATE). I WILL BE TRAVELING
VIA (CAR-TRAIN-CRUISE LINE-ETC) AND WILL BE RETURNING TO THE
USA ON (DATE). PLEASE EXPEDITE MY REQUEST FOR A PASSPORT CARD
AT YOUR EARLIEST CONVENIENCE.

THANK YOU FOR YOUR ASSISTANCE.

VERY TRULY YOURS,

Applicant's signature here

(APPLICANT'S NAME)



U.S. Department of State

STATEMENT OF CONSENT:

ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16

USE OF THIS FORM

The information collected on this form is used in conjunction with the DS-11, "Application for a U.S. Passport". When a minor under age of 16 applies for a passport and one of the minor's parent or legal guardians is unavailable at the time the passport is executed, a completed and notarized DS-3053 can be used as the statement of consent. If the required statement is not submitted, the minor may not be eligible to receive a U.S. passport. The required statement may be submitted in other formats provided they meet statutory and regulatory requirements.

FORM INSTRUCTIONS

1. Complete items 1 and 2.
2. Complete item 3, Statement of Consent, only if you are a non-applying parent or guardian consenting to the issuance of a passport for your minor child. NOTE: Your signature must be witnessed and notarized in item 4.
3. The written consent from the non-applying parent that accompanies an application for a new U.S. passport must not be more than 90 days old. A clear photocopy of the front and back of the non-applying parent's government-issued photo identification is required with the written consent.
4. Please submit this form with your minor child's new DS-11 passport application to any designated acceptance facility, U.S. Passport Agency, U.S. Embassy, or U.S. Consulate abroad.

WARNING: False statements made knowingly and willfully on passport applications, including affidavits or other supporting documents submitted therewith, may be punishable by fine and/or imprisonment under U.S. law, including the provisions of 18 U.S.C. 1001, 18 U.S.C. 1542, and/or 18 U.S.C. 1621.

FOR INFORMATION, QUESTIONS, AND INQUIRIES

For passport and travel information, please visit our website at travel.state.gov. In addition, contact the National Passport Information Center (NPIC) toll-free at 1-877-487-2778 (TDD 1-888-874-7793) or by e-mail at NPIC@state.gov. Customer Service Representatives are available Monday-Friday, 8:00 a.m. - 10:00 p.m. Eastern Standard Time (excluding federal holidays). Automated information is available 24/7.

For information on International Parental Child Abduction, please visit www.travel.state.gov/childabduction or contact the Office of Children's Issues by telephone at 1-888-407-4747 or by e-mail at PreventAbduction@state.gov.

PRIVACY ACT STATEMENT

AUTHORITIES: We are authorized to collect this information by 22 U.S.C. 211a et seq.; 8 U.S.C. 1104; 26 U.S.C. 6039E; Executive Order 11295 (August 5, 1966); and 22 C.F.R. parts 50 and 51.

PURPOSE: The primary purpose for soliciting the information is to establish two parent consent for a minor's passport application, as required by Public Law 106-113, Section 236.

ROUTINE USES: This information may be disclosed to another domestic government agency, a private contractor, a foreign government agency, or to a private person or private employer in accordance with certain approved routine uses. These routine uses include, but are not limited to, law enforcement activities, employment verification, fraud prevention, border security, counterterrorism, litigation activities, and activities that meet the Secretary of State's responsibility to protect U.S. citizens and non-citizen nationals abroad.

More information on the Routine Uses for the system can be found in System of Records Notices State-05, Overseas Citizen Services Records and State-26, Passport Records.

DISCLOSURE: Failure to provide the information requested on this form may result in the refusal or denial of a U.S. passport application.

PAPERWORK REDUCTION ACT STATEMENT

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time required for searching existing data sources, gathering the necessary data, providing the information and/or documentation required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: U.S. Department of State, Bureau of Consular Affairs, Passport Services, Office of Program Management and Operational Support, 2201 C Street NW, Washington, D.C. 20520.



U.S. Department of State

OMB CONTROL NO. 1405-0129
OMB EXPIRATION DATE: 08-31-2016
ESTIMATED BURDEN: 20 Minutes

STATEMENT OF CONSENT:
ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16
Attention: Read **WARNING** and **FORM INSTRUCTIONS** on page 1

1. MINOR'S NAME

Last		First		Middle	
------	--	-------	--	--------	--

2. MINOR'S DATE OF BIRTH (mm/dd/yyyy)

3. STATEMENT OF CONSENT To be completed by the non-applying parent or guardian using his/her information when not present at the time the applying parent or guardian submits the minor's application. **Statements expire after 90 days.**

I, _____, give my consent to the issuance of a United States passport to my minor child named on this application.

Print Name (non-applying parent)

Street Address (non-applying parent) Apartment City State Zip Code

()

Area Code

Telephone Number

E-mail Address

STOP! YOU MUST SIGN THIS FORM IN FRONT OF A NOTARY.

OATH: I declare under penalty of perjury that all statements made in this supporting document are true and correct.

Signature of Non-Applying Parent or Guardian

Date (mm/dd/yyyy)

NOTE: A clear photocopy of the front and back of the identification you presented to the notary is required with this form.

4. STATEMENT OF CONSENT NOTARIZATION

Name of Notary _____
Print Name (Notary Public)

Location _____
City, State

Commission Expires _____
Date (mm/dd/yyyy)

NOTARY
SEAL

Identification Presented by Non-Applying Parent or Guardian: ☐ Driver's License ☐ Passport ☐ Military ID ☐ Other (specify) _____

ID Number: _____ Place of Issue: _____

Issue Date (mm/dd/yyyy): _____ Expiration Date (mm/dd/yyyy): _____

OATH: By signing this document, I certify that I am a licensed notary under laws and regulations of the state or country for which I am performing my notarial duties, that I am not related to the above affiant, that I have personally witnessed him/her sign this document, and that I have properly verified the identity of the affiant by personally viewing the above notated identification document and the matching photocopy.

Signature of Notary _____ Date of Notarization _____
Date (mm/dd/yyyy)



U.S. Department of State
STATEMENT OF EXIGENT/SPECIAL FAMILY CIRCUMSTANCES
FOR ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16

USE OF THIS FORM

Passport applications for minors under the age of 16 require both custodial parents/legal guardians' signatures unless a notarized, written statement of consent from the non-applying custodial parent/legal guardian is provided.

Use this form only if the notarized, written consent of a parent or legal guardian with custody of the minor applicant under 16 cannot be obtained. Your statement in the form must explain the reason why you cannot obtain the notarized statement of consent. You must show that there are exigent or special family circumstances that make two parent/guardian consent unobtainable.

Your request may qualify as a **exigent circumstance** if there is a time-sensitive emergency and the inability of the minor to obtain a passport would jeopardize the minor's health or welfare.

Your request may qualify as a **special family circumstance** if the minor's family situation makes it exceptionally difficult or impossible for one or both of the minor's custodial parents/legal guardians to provide the notarized, written consent.

FORM INSTRUCTIONS

1. **Please complete the questions on this form to the best of your knowledge.** Generally, the more information you are able to provide, the faster we may be able to process your U.S. passport application.
2. **If you are unsure of the answer to a question, please provide a response to the best of your knowledge.** For example, if you are unsure of an exact address, please provide the city, state, or street name if you can recall them. Passport Services will consider all the information derived from the form in its entirety.
3. **If you have no knowledge of the answer to a question, please write "I don't know."**
4. If you need more space to respond to a question, please write the rest of your response on a separate sheet of paper.

FOR MORE INFORMATION AND/OR QUESTIONS

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WARNING

False statements made knowingly and willfully on passport applications, including affidavits or other supporting documents submitted therewith, may be punishable by fine and/or imprisonment under U.S. law, including the provisions of 18 U.S.C. 1001, 18 U.S.C. 1542, and/or 18 U.S.C. 1621.

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PURPOSE: The primary purpose for soliciting this information is to establish a possible exigent/special family circumstance exception to Public Law 106-113, Section 236, requiring two parent consent for a minor's passport application.

ROUTINE USES: This information may be disclosed to another domestic government agency, a private contractor, a foreign government agency, or to a private person or private employer in accordance with certain approved routine uses. These routine uses include, but are not limited to, law enforcement activities, employment verification, fraud prevention, border security, counterterrorism, litigation activities, and activities that meet the Secretary of State's responsibility to protect U.S. citizens and non-citizen nationals abroad.

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DISCLOSURE: Failure to provide the information requested on this form may result in the refusal or denial of a U.S. passport application.

PAPERWORK REDUCTION ACT STATEMENT

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time required for searching existing data sources, gathering the necessary data, providing the information and/or documents required, and reviewing the final collection. Responding to this collection of information is required to obtain a benefit. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: U.S. Department of State, Bureau of Consular Affairs, Passport Services, Office of Program Management and Operational Support, 2201 C Street NW, Washington, D.C. 20520.



U.S. Department of State
STATEMENT OF EXIGENT/SPECIAL FAMILY CIRCUMSTANCES
FOR ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16

OMB CONTROL NO. 1405-0216
OMB EXPIRATION DATE: 08-31-2016
ESTIMATED BURDEN: 30 Minutes

1. Minor's Name <i>(Last, First, Middle)</i>				2. Minor's Date of Birth <i>(mm/dd/yyyy)</i>	
3. Non-Applying Parent/Guardian's Name <i>(Last, First, Middle)</i>					
Last		First		Middle	
4. Other Names of Non-Applying Parent/Guardian			5. Non-Applying Parent/Guardian's Date of Birth <i>(mm/dd/yyyy)</i>		
6. Non-Applying Parent/Guardian's Last Known Contact Information					
Street				Apartment	
City		State	ZIP Code		Country
Telephone Number: () E-mail Address:					
7. Has any court either in the United States or abroad ever issued an order/decreed that references the custody or travel of the minor child in question? (Examples include a divorce decree, custody order, protection order, stay away order, restraining order, etc.) <div style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
<i>If yes, you must provide a complete, signed, and dated copy of the order(s)/decree(s) with this form.</i>					
8. Is the non-applying parent/guardian currently incarcerated? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(consent from the incarcerated parent/guardian may be required)</i>					
<i>If yes, please provide any documentation with this form, such as a letter from the convicting criminal court, a copy of the incarceration court order, or a copy of the on-line inmate locator page.</i>					
9. Please explain in detail the reason for your request to issue a U.S. passport book and/or card without the non-applying parent/guardian's consent. If you cannot locate the non-applying parent/guardian, please describe the number of attempts made to contact him or her, exact or approximate dates, the types of attempts (i.e., by letter, phone, e-mail, or in-person), and the outcome of each attempt. Please include the non-applying parent/guardian's last known address, telephone number(s), and place of employment.					
10. Have you attempted to contact the non-applying parent/guardian through any third party? If yes, please list the name of the person contacted, the relationship of the person contacted to the non-applying parent/guardian, the dates of the attempts to contact, and the address and/or telephone number of the contact.					
OATH: I declare under penalty of perjury that all statements made in this supporting document are true and correct.					
Signature of Parent or Legal Guardian:				Date <i>(mm/dd/yyyy):</i>	