



APPLICATION FOR A U.S. PASSPORT

Please Print Legibly Using Black Ink Only

OMB CONTROL NO. 1405-0004
 OMB EXPIRATION DATE: 08-31-2019
 ESTIMATED BURDEN: 85 MIN

Attention: Read **WARNING** on page 1 of instructions

Please select the document(s) for which you are applying:

- U.S. Passport Book
 U.S. Passport Card
 Both
The U.S. passport card is **not** valid for international air travel. For more information see page 1 of instructions.
 Regular Book (Standard)
 Large Book (Non-Standard)

Note: The large book option is for those who frequently travel abroad during the passport validity period, and is recommended for applicants who have previously required the addition of visa pages.

1. Name Last

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D
 O
 Dep DOTS _____
 End. # _____ Exp. _____

First	Middle
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2. Date of Birth (mm/dd/yyyy)
3. Sex
4. Place of Birth (City & State if in the U.S., or City & Country as it is presently known.)

	M F	
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5. Social Security Number
6. Email (Info alerts offered at travel.state.gov)
7. Primary Contact Phone Number

	@	
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8. Mailing Address: Line 1: Street/RFD#, P.O. Box, or URB.

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Address Line 2: **Clearly label** Apartment, Company, Suite, Unit, Building, Floor, In Care Of or Attention if applicable. (e.g., *In Care Of - Jane Doe, Apt # 100*)

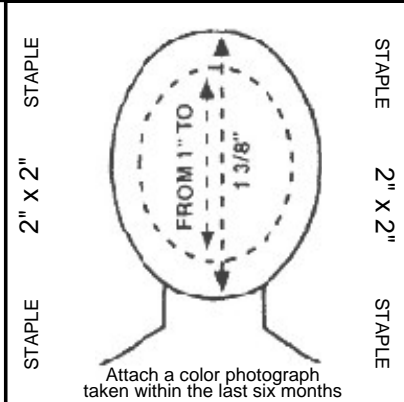
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City **State** **Zip Code** **Country**, if outside the United States

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9. List all other names you have used. (Examples: Birth Name, Maiden, Previous Marriage, Legal Name Change. Attach additional pages if needed)

A.	B.
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STOP! CONTINUE TO PAGE 2

DO NOT SIGN APPLICATION UNTIL REQUESTED TO DO SO BY AUTHORIZED AGENT

Identifying Documents - Applicant or Mother/Father/Parent on Second Signature Line (if identifying minor)

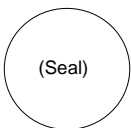
Driver's License
 State Issued ID Card
 Passport
 Military
 Other _____
 Name _____
 Issue Date (mm/dd/yyyy) _____ Exp. Date (mm/dd/yyyy) _____ State of Issuance _____
 ID No. _____ Country of Issuance _____

Identifying Documents - Applicant or Mother/Father/Parent on Third Signature Line (if identifying minor)

Driver's License
 State Issued ID Card
 Passport
 Military
 Other _____
 Name _____
 Issue Date (mm/dd/yyyy) _____ Exp. Date (mm/dd/yyyy) _____ State of Issuance _____
 ID No. _____ Country of Issuance _____

I declare under penalty of perjury all of the following: 1) I am a citizen or non-citizen national of the United States and have not, since acquiring U.S. citizenship or nationality, performed any of the acts listed under "Acts or Conditions" on page four of the instructions of this application (unless explanatory statement is attached); 2) the statements made on the application are true and correct; 3) I have not knowingly and willfully made false statements or included false documents in support of this application; 4) the photograph attached to this application is a genuine, current photograph of me; and 5) I have read and understood the warning on page one of the instructions to the application form.

- Acceptance Agent
 (Vice) Consul USA
 Passport Staff Agent



Name of courier company (if applicable) _____ Facility ID Number _____

Facility Name/Location _____ Agent ID Number _____

Signature of person authorized to accept applications _____ Date _____

X _____
Applicant's Legal Signature - age 16 and older
 X _____
Mother/Father/Parent/Legal Guardian's Signature (if identifying minor)
 X _____
Mother/Father/Parent/Legal Guardian's Signature (if identifying minor)



* DS 11 C 09 2013 1 *

For Issuing Office Only → Bk _____ Card _____ EF _____ Postage _____ Execution _____ Other _____

Name of Applicant (Last, First, & Middle) _____ Date of Birth (mm/dd/yyyy) _____

10. Parental Information
Mother/Father/Parent - First & Middle Name _____ Last Name (at Parent's Birth) _____

Date of Birth (mm/dd/yyyy) _____ Place of Birth _____ Sex Male Female U.S. Citizen? Yes No

Mother/Father/Parent - First & Middle Name _____ Last Name (at Parent's Birth) _____

Date of Birth (mm/dd/yyyy) _____ Place of Birth _____ Sex Male Female U.S. Citizen? Yes No

11. Have you ever been married? Yes No *If yes, complete the remaining items in #11.*

Full Name of Current Spouse or Most Recent Spouse _____ Date of Birth (mm/dd/yyyy) _____ Place of Birth _____

U.S. Citizen? Yes No Date of Marriage (mm/dd/yyyy) _____ Have you ever been widowed or divorced? Yes No Widow/Divorce Date (mm/dd/yyyy) _____

12. Additional Contact Phone Number _____ Home Cell Work **13. Occupation (if age 16 or older)** _____ **14. Employer or School (if applicable)** _____

15. Height _____ **16. Hair Color** _____ **17. Eye Color** _____ **18. Travel Plans**
Departure Date (mm/dd/yyyy) _____ Return Date (mm/dd/yyyy) _____ Countries to be Visited _____

19. Permanent Address - *If P.O. Box is listed under Mailing Address or if residence is different from Mailing Address.*

Street/RFD # or URB (No P.O. Box) _____ Apartment/Unit _____
City _____ State _____ Zip Code _____

20. Emergency Contact - *Provide the information of a person not traveling with you to be contacted in the event of an emergency.*

Name _____ Address: Street/RFD # or P.O. Box _____ Apartment/Unit _____
City _____ State _____ Zip Code _____ Phone Number _____ Relationship _____

21. Have you ever applied for or been issued a U.S. Passport Book or Passport Card? Yes No *If yes, complete the remaining items in #21.*

Name as printed on your most recent passport book _____ Most recent passport book number _____ Most recent passport book issue date (mm/dd/yyyy) _____

Status of your most recent passport book: Submitting with application Stolen Lost In my possession (if expired)

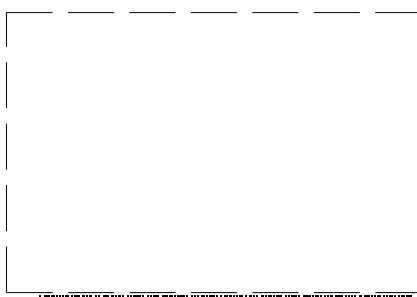
Name as printed on your most recent passport card _____ Most recent passport card number _____ Most recent passport card issue date (mm/dd/yyyy) _____

Status of your most recent passport card: Submitting with application Stolen Lost In my possession (if expired)

PLEASE DO NOT WRITE BELOW THIS LINE - FOR ISSUING OFFICE ONLY

Name as it appears on citizenship evidence _____

- Birth Certificate SR CR City Filed: _____ Issued: _____
- Nat. / Citiz. Cert. USCIS USDC Date/Place Acquired: _____ A# _____
- Report of Birth Filed/Place: _____
- Passport C/R S/R Per PIERS #/DOI: _____
- Other: _____
- Attached: _____



P/C of Citiz P/C of ID DS-71 DS-3053 DS-64 DS-5520 DS-5525 PAW NPIC IRL Citiz W/S * DS 11 C 09 2013 2 *



RJR INTERNATIONAL PASSPORT VISAS, INC.
3801 E. FLORIDA AVENUE, STE. 400
DENVER, CO 80210
303 753-0424

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 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: RJR INTERNATIONAL PASSPORT VISAS

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)