U.S. Department of State

APPLICATION FOR U.S. PASSPORT BY MAIL

PLEASE DETACH AND RETAIN THIS INSTRUCTION SHEET FOR YOUR RECORDS.

Date of Application:

CAN I USE THIS FORM?

Complete this checklist to determine your eligibility to use this form.

1. I can submit my most recent U.S. passport. ☐ Yes ☐ No
2. I was at least 16 years old when my most recent U.S. passport was issued. ☐ Yes ☐ No
3. I was issued my most recent U.S. passport less than 15 years ago. ☐ Yes ☐ No
4. I use the same name as on my most recent U.S. passport; OR, I have had my name changed by marriage or court order and can submit proper documentation to reflect my name change. ☐ Yes ☐ No

If you answered NO to any of the four statements above, STOP - You cannot use this form!!!
You must apply on application form DS-11 by making a personal appearance before a passport agent, postal clerk or clerk of court authorized to accept passport applications.

CAREFULLY FOLLOW THE INSTRUCTIONS ON THE REVERSE OF THIS PAGE

INCOMPLETE OR UNACCEPTABLE APPLICATIONS WILL DELAY THE ISSUANCE OF YOUR PASSPORT.

FOR INFORMATION, QUESTIONS, AND INQUIRIES: Please visit our website at **travel.state.gov** OR contact the National Passport Information Center at 1-900-225-5674, For TDD: 1-900-225-7778; or for credit card users: 1-888-362-8668, For TDD: 1-888-498-3648.

WHAT DO I NEED TO SEND WITH THE APPLICATION FORM?

1. **Your most recent U.S. passport.**
2. **A marriage certificate or court order if your name has changed.**
3. **Passport processing fee of $55.**
4. **Two recent identical photographs with a light, plain background and taken within the last 6 months.**

For detailed information on the items to be included, see below.

1. **YOUR MOST RECENT U.S. PASSPORT.** Issued at age 16 or older in your current name (or see item #2 below) and issued within the past 15 years. If your passport is damaged, you must apply on the DS-11 application form as specified below.

2. **A MARRIAGE CERTIFICATE OR COURT ORDER.** If the name you are currently using differs from the name on your most recent passport, you must submit a marriage certificate or court order showing the change of name. The name change document MUST bear the official seal of the issuing authority. Uncertified copies or notarized documents cannot be accepted. All documents will be returned to you with your passport. If you are unable to document your name change in this manner, you must apply on the DS-11 application form by making a personal appearance at (1) a passport agency; (2) any clerk of a Federal or State court of record or judge or clerk of a probate court accepting passport applications; or (3) a designated municipal or county official, or a designated postal employee at an authorized post office.

3. **THE PASSPORT PROCESSING FEE OF $55.** Enclose the $55 passport processing fee in the form of a personal check or money order.

MAKE CHECKS PAYABLE TO "U.S. DEPARTMENT OF STATE", THE FULL NAME AND DATE OF BIRTH OF THE APPLICANT MUST BE TYPED OR PRINTED ON THE FRONT OF THE CHECK. DO NOT SEND CASH. Passport Services cannot be responsible for cash sent through the mail. By law, the passport processing fee is non-refundable.

For faster processing, you may request Expedited Service. Expedited requests will be processed in 3 workdays from receipt at a Passport Agency. The additional fee for Expedited Service is $60. Expedited Service is available only in the United States.

If you desire **SPECIAL POSTAGE SERVICE** (registered, special delivery, etc.), include the appropriate postage fee on the check.

4. **TWO RECENT IDENTICAL PHOTOGRAPHS**. The photographs must have been taken within the past six months and be a good likeness of you. The photographs must be clear with a full front view of your face and taken on a light (white or off-white) background. Photographs may be in color or black and white and the image size must correspond to the dimensions on the diagram on page 3 of this form. Photographs must be taken in normal street attire, showing you without headcovering unless a signed statement is submitted that the headcovering is worn daily for religious or medical reasons. Dark glasses may not be worn in passport photographs unless a doctor's statement is submitted supporting the wearing of dark glasses for medical reasons.

MAIL THIS FORM TO:

National Passport Center
P.O. Box 371971
Pittsburgh, PA. 15250-9971

DELIVERY - Other Than U.S. Postal Service

Passport Services Lockbox
Attn: Passport Supervisor, 371971
500 Ross Street, Room 154-0670
Pittsburgh, PA. 15250-9971

FOR INQUIRIES CONTACT:

National Passport Information Center
1-900-225-5674
For TDD: 1-900-225-7778
For Credit Card Users:
1-888-362-8668
For TDD: 1-888-498-3648

NOTICE TO APPLICANTS RESIDING ABROAD

United States citizens residing abroad CANNOT submit this form to the Passport Facility listed above. Such applicants should contact the nearest United States Embassy or Consulate for procedures to be followed when applying overseas.

NOTICE TO APPLICANTS FOR OFFICIAL, DIPLOMATIC, OR NO-FEE PASSPORTS

You may use this application if you meet all of the provisions listed above. Submit your U.S. Government or military authorization for a no-fee passport with your application in lieu of the passport fee. CONSULT YOUR SPONSORING AGENCY FOR INSTRUCTIONS ON PROPER ROUTING PROCEDURES BEFORE FORWARDING THIS APPLICATION. Your completed passport will be released to your sponsoring agency for forwarding to you.

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U.S. Department of State

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TYPE OR PRINT IN BLUE OR BLACK INK IN WHITE AREAS ONLY USE BLOCK LETTERS/NUMBERS

NAME: FIRST | MIDDLE

LAST

MAIL PASSPORT TO

STREET / RFD # OR P.O. BOX | APT. #

CITY | STATE | ZIP CODE

IN CARE OF *(IF APPLICABLE)*

Issue Date _____

R D O DP

End. # _____ Exp. _____

SEX: ☐ Male ☐ Female

PLACE OF BIRTH: City & State or City & Country

DATE OF BIRTH: Month | Day | Year

SOCIAL SECURITY NUMBER (SEE FEDERAL TAX LAW NOTICE ON REVERSE SIDE)

FOLD

HEIGHT: Feet | Inches

HAIR COLOR

EYE COLOR

HOME TELEPHONE

BUSINESS TELEPHONE

NOTE: Most recent passport MUST be enclosed!

U.S. PASSPORT NUMBER

ISSUE DATE: Month | Day | Year

PLACE OF ISSUANCE

OCCUPATION *(Not Mandatory)*

DEPARTURE DATE

TRAVEL PLANS *(Not Mandatory)*

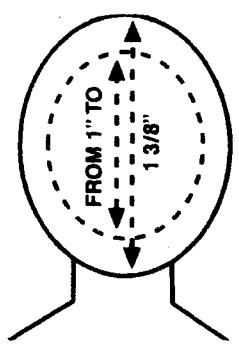
COUNTRIES TO BE VISITED

LENGTH OF STAY *(Not Mandatory)*

PERMANENT ADDRESS (Do not list P.O. Box)

STREET / R.F.D. # | CITY | STATE | ZIP CODE

Staple 2" x 2" Staple



SUBMIT TWO RECENT IDENTICAL PHOTOS WITH LIGHT, PLAIN BACKGROUND

EMERGENCY CONTACT. If you wish, you may supply the name, address and telephone number of a person not traveling with you to be contacted in case of emergency.

NAME

STREET

CITY | STATE | ZIP CODE

TELEPHONE | RELATIONSHIP

OATH AND SIGNATURE

I have not, since acquiring United States Citizenship, performed any of the acts listed under "Acts or Conditions" on the reverse of this application form (unless explanatory statement is attached.)

I solemnly swear (or affirm) that the statements made on this application are true and the photograph attached is a true likeness of me, and that I have not been issued a passport subsequent to the one submitted herein.

FOLD

→ **NOTE: APPLICANT MUST SIGN & DATE**

SIGNATURE | DATE

DO NOT WRITE BELOW THIS SPACE - **FOR PASSPORT SERVICES USE ONLY** - DO NOT WRITE BELOW THIS SPACE

Application Approval

Evidence of Name Change

☐ Marriage Cert. ☐ Court Order

Date _____

Place _____

From _____

To _____

Fees

OMB No. 1405-0020 Expires: 03/31/2005 Estimated Burden 15 Minutes (See Page 4)

In accordance with 5 CFR 1320 5(b), persons are not required to respond to the collection of this information unless this form displays a currently valid OMB control number.

APPLICATION FOR U.S. PASSPORT BY MAIL

FEDERAL TAX LAW

26 U.S.C. 6039E (Internal Revenue Code) requires a passport applicant to provide his or her name and social security number. If you have not been issued a social security number, enter zeros in the appropriate boxes. The U.S. Department of State must provide this information to the Internal Revenue Service routinely. Any applicant who fails to provide the required information is subject to a **$500** penalty enforced by the IRS. All questions on this matter should be referred to the nearest IRS office.

ACTS OR CONDITIONS

(If any of the below-mentioned acts or conditions has been performed by or apply to the applicant, the portion which applies should be lined out, and a supplementary explanatory statement under oath (or affirmation) by the applicant should be attached and made a part of this application.) I have not, since acquiring United States citizenship, been naturalized as a citizen of a foreign state; taken an oath or made an affirmation or other formal declaration of allegiance to a foreign state; entered or served in the armed forces of a foreign state; accepted or performed the duties of any office, post, or employment under the government of a foreign state or political subdivision thereof; made a formal renunciation of nationality either in the United States, or before a diplomatic or consular officer of the United States in a foreign state; or been convicted by a court or court martial of competent jurisdiction of committing any act of treason against, or attempting by force to overthrow, or bearing arms against, the United States, or conspiring to overthrow, put down, or to destroy by force, the Government of the United States.

WARNING: False statements made knowingly and willfully in passport applications or in affidavits or other supporting documents submitted therewith are punishable by fine and/or imprisonment under provisions of 18 U.S.C. 1001 and/or 18 U.S.C. 1542. Alteration or mutilation of a passport issued pursuant to this application is punishable by fine and/or imprisonment under the provisions of 18 U.S.C. 1543. The use of a passport in violation of the restrictions contained therein or of the passport regulations is punishable by fine and/or imprisonment under 18 U.S.C. 1544. All statements and documents submitted are subject to verification.

PRIVACY ACT AND PAPERWORK REDUCTION ACT STATEMENTS

AUTHORITIES: The information solicited on this form is requested pursuant to provisions in Titles 8, 18, and 22 of the United States Code, whether or not codified, including specifically 22 U.S.C. 211a, 212, and 213, and all regulations issued pursuant to Executive Order 11295 (August 5, 1966), including Part 51, Title 22, Code of Federal Regulations (CFR). Also, as noted, 26 U.S.C. 6039E.

PURPOSE: The primary purpose for soliciting the information is to establish citizenship, identity, and entitlement to issuance of a U.S. passport. The information may also be used in connection with issuing other travel documents or evidence of citizenship, and in furtherance of the Secretary's responsibility for the protection of U.S. nationals abroad.

ROUTINE USES: The information solicited on this form may be made available as a routine use to other government agencies, to assist the U.S. Department of State in adjudicating passport applications, and for law enforcement and administration purposes. It may also be disclosed pursuant to court order. The information may be made available to foreign government agencies to fulfill passport control and immigration duties or to investigate or prosecute violations of law. The information may also be made available to private U.S. citizen 'wardens' designated by U.S. Embassies and Consulates.

Failure to provide the information requested on this form may result in the denial of a United States passport, related document, or service to the individual seeking such passport, document or service.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time required for searching existing data sources, gathering the necessary data, providing the information required, and reviewing the final collection. You do not have to provide the information unless this collection displays a currently valid OMB number. Send comments on the accuracy of this estimate of the burden and recommendations for reducing it to: U.S. Department of State (A/RPS/DIR) Washington, DC 20520.

☆U.S. GPO: 2003—497-758