

CONSULATE GENERAL OF JAMAICA 767 Third Avenue, New York, NY 10017

STATEMENT CONCERNING UNAVAILABILITY OF PREVIOUS PASSPORT

Date					
Address					
TO WHOM IT MAY CONCERN					
l, (name in full)do hereby state that the following are the circumstances under which my previous passport is now unavailable for renewal/replacement:					
further declare that to the best of my knowledge and recollection the above statement is true					
Signed					



LOST PASSPORT APPLICATION

Consulate General of Jamaica – New York NY, USA

False statements entered on this form constitute fraud and is a breach of the Passport Act

1.	Last Name				
2	Maiden Name (If Applicable Parish & Country of Birth				
	Date of Birth				
	Permanent Address	_	•		
5.	City		_		
6.	Telephone number(s)				
	Place & Date of Jesus				
	Place & Date of Issue Date of Loss				
	0. Circumstances under which passport was lost				
11. What measures was taken to report loss & obtain recovery					
12. Has passport ever been sent across national borders YES NO If YES, please explain					
	II 1 E.S., piease expiaii				
13.	References in USA		References in Ja	amaica	
	Name				
	Address				
	Telephone				
14. Fathers Name & Address					
Mothers Name & Address					
Others Relatives Name & Address					
	ve the information entered aboants Signature				
FOR OFFICIAL USE ONLY – DO NOT WRITE BELOW THIS LINE					
Docum	nents Used				

Authorized Signature.....