

APPLICATION FOR LOST/MUTILATED/PASSPORT

FILE NUMBER R.....

1	Forename (s) (as in passport):		
2	Surname Names:		
3	Date of Birth	Day	Month Year
4	Passport Number:	Date of Issue	
5	Place of Birth:	Country of Birth:	
6	Gender:	Female <input type="checkbox"/>	Male <input type="checkbox"/>
7	Have you ever traveled on the passport that is reported lost	Yes <input type="checkbox"/>	No <input type="checkbox"/>

8	Postal Address:		
	Postal code:		
	Telephone	Town	Country
	Fees chargeable (i) Mutilated Passport Kshs. 10,000 RECEIPT No.....		
	Fees chargeable (ii) Lost passport Kshs . 12,000 RECEIPT No.....		

Declaration

The information I have given is true to the best of my knowledge

Place..... Date.....Signature.....

For official Use

Disabling of passport (overseas)	Passport Officer In -charge (Embassy stamp/sign)