Form 6

Regulation 7(4)

DECLARATION OF LOST, STOLEN OR MUTILATED BELIZE PASSPORT

WARNING TO ALL APPLICANTS
Any such person who makes a written or oral statement knowingly to be false
Or misleading is guilty of an offence and is liable to fine and Imprisonment

PLEASE PRINT INFORMATION IN BLOCK LETTERS USING DARK BLUE OR BLACK INK PEN

FOR OFFICIAL USE ONLY
PASSPORT CONTROL OFFICER
____
____
____
____

THIS FORM IS TO BE FILLED OUT BY THE APPLICANT & SHOULD BE SIGNED IN THE PRESENCE OF THE COMMISSION OF AFFIDAVITS, JUSTICE OF THE PEACE OR NOTARY PUBLIC

This is to report the loss, theft or mutilation of a Belize passport **IMPORTANT: Completing this form will not provide you with a replacement passport. To replace your lost, stolen or mutilated passport**, you will need to submit this form, one passport sized photograph, a passport application form, supporting documents and fee

1. DETAILS OF THE LOST/STOLEN OR MUTILATED PASSPORT

NAMES IN WHICH THE PASSPORT WAS ISSUED

SURNAME

/___/

FIRST NAME

__/__

MIDDLE NAME(S) / _/___/

DATE OF BIRTH ___/___ ___/___/___ ___/___/___

Date Month Year

TOWN/ CITY OF

BIRTH/___/__

COUNTRY OF BIRTH /___/__

PASSPORT NO. /___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/

DATE OF ISSUE ___/___ ___/___ ___/___/___/___

Date Month Year

ISSUE OFFICE /___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/_/

/___/

STATUS OF PASSPORT ☐ LOST ☐ STOLEN ☐ MUTILATED

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2. CURRENT DETAILS (TO BE FILLED ONLY IF DIFFERENT FROM SECTION 1)

CURRENT

SURNAME/___/___/___/___/___/___/___/___/___/___/____/___/___/___/____/___/___/___/___/___/___/___/___/___/___/___/__/

CURRENT FIRST

NAME/___/___/___/___/__/___/

CURRENT MIDDLE NAMES(S)

/___/

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3. CURRENT HOME ADDRESS

/___/

/___/___/___/___/___/___/___/___/___/___/___/___/___/___/_HOME TEL. NO__/___/___/___/___/___/___/___/___/___/___/___/ E-MAIL

ADDRESS_________________________________ MOBILE NO. /___/___/___/___/___/___/___/___/___/___/___/___/

4. POLICE REPORT

HAS THE LOST/ THEFT OF THE PASSPORT BEEN REPORTED TO THE POLICE? YES [ ] NO [ ]

DATE REPORTED TO POLICE ___/__ ___/__ ___/___/___/___

Day *Month* *Year*

POLICE STATION/___/___/__/__/___/

AND ADDRESS

_/__/

5. DETAIL HOW, WHEN OR WHERE THE LOSS, THEFT OR MULTILATION OF THE PASSPORT OCCURRED.

6. HAVE YOU HAD ANY OTHER BELIZE PASSPORT LOST, STOLEN OR MUTILATED? (Yes ( ) NO( )

7. STATE THE COUNTRIES FOR WHICH YOU HAD VISAS ENDORSED IN THE PASSPORT

I the undersigned certify that the information provided herein is correct and that I have not sold, pledge or otherwise given my passport to another person or disposed of it in an unauthorized manner. I understand that upon submission of this form, the related passport would be invalidated and can no longer be used. If the passport is subsequently found or recovered. I will immediately return same to the nearest Passport Office or Belize Foreign Mission

Dated ___/__ ___/__ ___/___/___/__ …………………………………………

Day *Month* *Year* *Signature of Applicant*

CERTIFICATION BY THE COMMISSIONER OF AFFIDAVITS, JUSTICE OF THE PEACE OR NOTARY PUBLIC

For passports lost, stolen or mutilated in Belize – certification by a Commissioner of Affidavits or a Justice of the Peace.
For passports lost, stolen or mutilated outside the country of Belize – certification by a Notary Public.

Made and subscribed this _________________*day of* _________________________ *in the year* ___________________________
before me

……………………………………………………. ………………………………………………………

Name in Block Letters **Signature**

…………………………………………………..

Official Title

$1.50 postage stamp to be included