

Lost Passport Form Online

Personal Details

Full Name: _____

Date of Birth: _____

Email Address: _____

Phone Number: _____

Passport Information

Passport Number (If Available): _____

Country of Issue: _____

Date of Issue: _____

Expiration Date: _____

Lost or Stolen Declaration

- ☐ My passport was lost.
- ☐ My passport was stolen.
- ☐ My passport was damaged beyond recognition.

Description of Incident

Date of Loss: _____

Location Where Passport Was Lost/Stolen: _____

Police Report

Was a police report filed? ☐ Yes ☐ No

If yes, enter the report details:

Police Report Number: _____

Date Reported: _____

Police Station Name: _____

Authorization & Certification

I, (Full Name), certify that the information provided is accurate and request the issuance of a replacement passport.

Signature: _____

Date: _____

Government Official Use Only

Processed By: _____

Approval Signature: _____

Date: _____