

Citizenship by Investment Programs FORM B

Passport Application Form

THIS APPLICATION SHOULD BE SUBMITTED WITH

- Two (2) recent, identical passport photos (less than 6 months old). The Identity Witness must write the applicant's full name on the back of one photo, and sign and date the back of the photo.
- Copy Married Certificate (women only)
- The appropriate fee (VT) for the service required:
 - Child 0 to 5 years old VT 5,000
 - Child 6 to 17 years old VT 7,000
 - ♦ Normal 10,000 (Up to 21 days processing time)
 - Express 20,000 (Up to 10 days processing time)
 - Urgent VT 25,000 (up to 3 days processing time)
- Copy of citizenship certificate issued by the Vanuatu Citizenship office
- · Copy of confirmation letter issued by the Vanuatu Citizenship office
- Copy of birth certificate for home country
- Copy of FIU clearance Certificate
- · Copy of Police clearance of home country
- Copy of National ID card of home country

	PASSPORT PHOTO
	participal in the second
	Signature of passport holder must be inside box
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Copy of original passport of home country						
PARTICULARS OF APPLICANT						
Copy of passport of origin (Select one:)	YES NO	ES NO Designated agent:		LA SECULIA		
Passport Number:		Service Level (See	Select one:) NORMAL PRIORITY			
Family Name:		Gender (Select o	Gender (Select one): MALE FEMALE			
Given Name/s:	OCC STATE	Date of Birth:	D D M M Y Y Y			
Middle Name/s:	Other Name/s:	N	lame at Birth:	FFERENT EROMF AMILY AND GIVEN NAMES ABOVE		
CITIZENSHIP DECLARATION						
I declare that I am a citizen of Vanuatu: (Tick options as applicable) Citizen by naturalization granted by the Citizenship Commission after 30 July 1980. (Provide both an original birth certificate and Vanuatu citizenship Certificate). List previous nationality/ies and passport details below: Dual citizenship						
Previous Nationality/ies:		Passport Numb	er:			
Place of Issue:	Issue Date:	The second	Expiry 1	Date:		
TOWN OR CITY	D D M	M Y Y Y	Y	B D M M, V V V		
Marital Status: Single Married	Divorced De fac	cto Driving License	e No:	ID No:		
Place of Birth: Co	ountry of Birth:	E	Eye Color: Height (cm):			
Occupation/ Profession:	Marks/ Scars:	Marks/ Scars:		Phone Number:		
Present Address:						
CONSENT TO ISSUE A PASSPORT TO A PERSON UNDER 18 YEARS OF AGE						
(Parent or Guardian to complete this section and sign the Application Declaration below)						
My Name is: FAMILY AND GIVEN MANJE OF PERSON	MARKET LAND		My Date of Birth i			
I consent to a passport being issued to: My relationship to the child is (Select one): Mother Guardian						
APPLICATION DECLARATION	IDENTITY	WITNESS DET	AILS	OFFICE USE ONLY		
I declare that all particulars in this application are true respects. I understand that if I make a false or mislea						
statement, orally or in writing, in connection With	this Phone Number:	Phone Number:				
Vanuatu passport application I can, by law, be fined VT 5,000,000 and imprisoned for up to 5 years or both		Passport Number: IF APPLICABLE				
	Address:	Address:				
Signature:	I declare that: I have known the appinformation on this knowledge. The perapplicant named on t	I have known the applicant for at least one year, and the information on this form is correct to the best of my knowledge. The person in the passport photo is the applicant named on this form.				
Date: / /	Signature / Thumbn	Signature / Thumburint of Witness:				