

**xAPPLICATION FOR LOST / MUTILATED PASSPORT**

**Submit In Triplicate**

**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:		Place of Issue:
5.	Place of Birth:	Country of Birth:		
6.	Gender:	Female	Male:	
7.	Have you ever travelled on the passport that is reported lost? Countries Visited.		Yes	No
8.	Postal Address in Country of Residence:			
	Postal Code:			
	Telephone:	Town:	Country:	
	Fees chargeable (i)Mutilated R1300		Receipt No:	
	Fees chargeable (ii)Lost passport R1400		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)