The following page contains a "Letter of Authorization" allowing PVSglobal to provide US State Department services on your behalf. Please complete steps 1 and 2 as described.

# **STEP 1 of 2 – Fill Form** (alternately you may print and complete as instructed by hand):

#### Check the following two boxes:

**Enter the following information:** 

I authorize the company stated below to submit my passport application to a passport agency and pick up the passport from a U.S. passport agency on my behalf.

I authorize the passport agency to disclose to the company listed below any requests for further documentation and/or information that that may arise in connection with my passport application, and I authorize the company to respond to such requests under my direction.

_	
Applicants First Name:	
Applicants Middle Name:	
Applicants Last Name:	
Applicants Phone Number:	
	Area Code XXX XXXX
Today's Dato:	
Today's Date:	
	MM DD YYYY

### STEP 2 of 2

#### Print page 2 and:

- On the "Courier Company Name" line, write "It's Easy Passport"
- Sign your name (or your child's name if applying for a child's passport) on the signature line
- Include on copy inside sealed envelope, include "extra copy" outside of sealed envelope



Please check **all** that apply:

## **Letter of Authorization**

Please carefully read the information below before completing this Letter of Authorization.

An individual's personal information cannot be released by the U.S. government to another party without the written consent of the individual under the provisions of the Privacy Act of 1974 (5 USC 552a). As a result, an employee at a U.S. passport agency cannot discuss the details of your passport application with a third party without your written consent.

	I authorize the company stated below to submit my passport application to a passport agency and pick up the passport from a U.S. passport agency on my behalf.					
documentation	I authorize the passport agency to disclose to the company listed below any requests for further documentation and/or information that that may arise in connection with my passport application, and I authorize the company to respond to such requests under my direction.					
further docume passport agency	ntation and/or information to to contact me directly shows of the than the date on wh	hat may arise with r ald an issue arise wi	ny listed below any requests for ny passport application. I want the th my passport application that be ready for pick-up from the			
Applicant Information  (Note: All of the information below may ONLY be filled out by the applicant, parent, legal guardian, or person legally acting in loco parentis)						
Applicant Name:						
	Last Name	First Name	Middle Name			
Applicant Phone No:	Area Code XXX	XXXX	Date://			
Courier Company Name	e:					
Applicant Signature:	(If the applicant is under the in loco parentis must sign)	age of 16 the parent(s), l	egal guardian(s), or person legally acting			

**Updated:** 09/10/13



Please check **all** that apply:

## **Letter of Authorization**

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documentat	the passport agency to disclostion and/or information that the rize the company to respond t	nat may arise in connection	n with my passport application			
further docu passport age	ency to contact me directly shatters other than the date on w	n that may arise with my nould an issue arise with r	passport application. I want the my passport application that			
	Applies	ant Information				
(Note: All of t	the information below may (	ONLY be filled out by the gally acting in loco par				
	guardian, or person is	egany acting in foco par	enus)			
Applicant Name:						
	Last Name	First Name	Middle Name			
Applicant Phone No	o: ()		Date:/			
	Area Code XXX	XXXX	MM DD YYYY			
Courier Company N	Name:					
Applicant Signature		he age of 16 the parent(s) lega	l guardian(s), or person legally acting			
	in loco parentis must sign)		- 5 stant(0), or person regard acting			

**Updated:** 09/10/13