

Guide on How to Complete the application form for replacements
Jamaican Passport Replacement (Stolen/ Lost/ Unavailable/ Damaged)
for Adults and Minors (under 18 years old)

Note: Applicant's Personal Data must be consistent with the information on Passport Bio-page, and Birth Certificate.

If an applicant must make a correction on the form, please place a line through the incorrect information and place signature above same instead of using correction fluid (whiteout).

For documents in languages outside of English, please note that you are required to consult with an authorized official translator for the document's translation to English. Please ensure that the translated version in English is notarized by a Notary public.

The Embassy of Jamaica, Tokyo would recommend that upon completion of the passport application form, to have same scanned and sent to this e-mail (firstsecretary@jamaicaembassy.jp) for a quick review for accuracy, along with supporting documents to check for consistency.

Passport Replacement Applications must be accompanied by the following:

- ✓ Completed passport application form,
- ✓ Original or Certified copy of Birth certificate (Officially translated & Notarised documents MUST be submitted, where necessary),
- ✓ Original or Certified copy of Marriage, Divorce, or Death Certificate, as appropriate (Officially translated & Notarised documents MUST be submitted, where necessary),
- ✓ Three (3) Passport-sized photographs (one to be certified by a Notary Public, Jamaican Honorary Consul or Consular Officer),
- ✓ **Damaged or Unavailable current Jamaican passport,**
- ✓ **Original Police Report of the Passport being lost, along with translation to English, duly notarized,**
- ✓ **Statement concerning damage, in the case of damaged passports,**
- ✓ **Copy of lost Jamaican passport, if possible,**
- ✓ Requisite passport and consular fees.

Passport fees:

Replacement of stolen, lost, unavailable, damaged passport (adult) - ¥ 24,200

Replacement of stolen, lost, unavailable, damaged passport (child) - ¥ 14,200

How to fill in Passport Application Section A, Page 1

Jamaican Passport Application Form

PLEASE READ THE INFORMATION SHEET CAREFULLY BEFORE COMPLETING THIS FORM

A APPLICANT'S PERSONAL DATA			
Surname <input style="width: 100%; height: 15px;" type="text"/>	Profession or Occupation <input style="width: 100%; height: 15px;" type="text"/>		
First Name <input style="width: 100%; height: 15px;" type="text"/>	Marital Status Single <input type="radio"/> Divorced <input type="radio"/> Married <input type="radio"/> Widowed <input type="radio"/>		
Middle Name(s) <input style="width: 100%; height: 15px;" type="text"/>	Eye Colour Dark Brown <input type="radio"/> Brown <input type="radio"/> Grey <input type="radio"/> Grey Blue <input type="radio"/> Blue <input type="radio"/> Hazel <input type="radio"/> Chestnut <input type="radio"/> Black <input type="radio"/> Red <input type="radio"/> Burgundy <input type="radio"/> Mixed <input type="radio"/>		
Maiden Surname (family name at birth) <input style="width: 100%; height: 15px;" type="text"/>	Place of Birth: (Town, City and Parish) <input style="width: 100%; height: 15px;" type="text"/>		
Previous Name: (if name has been changed other than by marriage) <input style="width: 100%; height: 15px;" type="text"/>	Date of Birth (DD/MM/YYYY) <input style="width: 100%; height: 15px;" type="text"/>	Sex Male <input type="radio"/> Female <input type="radio"/>	Height <input style="width: 100%; height: 15px;" type="text"/> cm
Place of Birth <input style="width: 100%; height: 15px;" type="text"/>	Mother's First Name <input style="width: 100%; height: 15px;" type="text"/>		
Special Visible Features <input style="width: 100%; height: 15px;" type="text"/>	Mother's Maiden Name (Surname before Marriage) <input style="width: 100%; height: 15px;" type="text"/>		
APPLICANT'S PERMANENT ADDRESS Street Number and Street name <input style="width: 100%; height: 15px;" type="text"/>		APPLICANT'S MAILING ADDRESS (if different from permanent address) Street Number and Street name <input style="width: 100%; height: 15px;" type="text"/>	
Town, City and Parish <input style="width: 100%; height: 15px;" type="text"/>		Town, City and Parish <input style="width: 100%; height: 15px;" type="text"/>	
Country <input style="width: 100%; height: 15px;" type="text"/>		Country <input style="width: 100%; height: 15px;" type="text"/>	
Postal or Zip Code <input style="width: 100%; height: 15px;" type="text"/>	State <input style="width: 100%; height: 15px;" type="text"/>	Postal or Zip Code <input style="width: 100%; height: 15px;" type="text"/>	State <input style="width: 100%; height: 15px;" type="text"/>
Residential Telephone Number Area Code Seven Digit Number <input style="width: 100%; height: 15px;" type="text"/>		Business Telephone Number Area Code Seven Digit Number <input style="width: 100%; height: 15px;" type="text"/>	
E-Mail Address: <input style="width: 100%; height: 15px;" type="text"/>			
B TO BE COMPLETED IF APPLICANT IS OR HAS BEEN MARRIED			
Date of Marriage (DD/MM/YYYY) <input style="width: 100%; height: 15px;" type="text"/>	Place of Marriage: (Town, City and Parish) <input style="width: 100%; height: 15px;" type="text"/>	Country: <input style="width: 100%; height: 15px;" type="text"/>	
Spouse's Name: (If Married, divorced or widowed) First Name <input style="width: 100%; height: 15px;" type="text"/>		Surname <input style="width: 100%; height: 15px;" type="text"/>	

Profession or Occupation for a minor would be either "Minor" or "Student".

A single person and a minor **are not required** to write maiden name.

Place of Birth needs to be consistent with Birth Certificate.

If permanent and mailing addresses are same, Applicant fills in only permanent address.

If Applicant has a plan to return to Jamaica in near future, Permanent address should be the one in Jamaica.

Telephone number of your current residence

If Applicant is or has been married.

Section C, Page 2



Signature of the Applicant WITHIN the box above

Note: Signature is not required for applicants under the age of 12 years

Thumb Print Box Below
For person: unable to sign

Please ensure that the signature that is placed inside the rectangular box at the top of the page is the same as the one at the end of Section E.

Signature is not required for applicants under the age of 12 years.

For a minor, the parent/legal guardian submitting the application is required to complete **sections C and E** of the application form.

C CONSENT FOR MINOR (Applicable to persons under 18 years of age. Mother, Father or Legal Guardian may give consent)		
Particulars of person giving consent to minor		
Surname (parent or legal guardian)	First Name	Middle Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Relationship to above-named person to minor		
Mother <input type="radio"/>	Father <input type="radio"/>	Legal Guardian <input type="radio"/>
Declaration of person giving consent:		
I (name) <input type="text"/> the (Relationship), <input type="text"/>		
Of (Minor's Name) <input type="text"/> give my consent for him/her to hold a passport.		
Signature of Parent or Legal Guardian		Date
<input type="text"/>		<input type="text"/>

Section D and E, Page 2

D PARTICULARS OF MOST RECENT PASSPORT: (This information is required whether the passport is expired or current, damaged, lost or otherwise unavailable)		
Passport Number	Date of Issue (DD/MM/YYYY)	Date of Loss (DD/MM/YYYY) Damaged
<input type="text"/>	<input type="text"/>	<input type="text"/>
Place of Issue		
<input type="text"/>		
Name in which stolen, lost or unavailable passport was issued		
Surname	First Name	Middle Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Place of Loss (City, Parish):	BRIEF STATEMENT OF CIRCUMSTANCES WHERE PASSPORT HAS BEEN DAMAGED	
<input type="text"/>	<input type="text"/>	
E DECLARATION OF APPLICANT		
I, the undersigned, apply for the issue of a Jamaican Passport. I declare that the information given in this application is correct to the best of my knowledge and belief. I further declare that:		
<input type="radio"/> I have not previously held or applied for a Jamaican Passport		
<input type="radio"/> All previous passports granted to me have been surrendered, other than Passport or Travel Document No. <input type="text"/>		
<input checked="" type="radio"/> My passport has been lost or is not available for present use and that I have reported the circumstances to the Police or to the Passport Office (Kingston) or to the Jamaican Consular representative overseas.		
Signature of Applicant		Date of Declaration (DD/MM/YYYY)
<input type="text"/>		<input type="text"/>

Please ensure to fill in Section D in case of the passport being lost, damaged, unavailable, or stolen.

In case of Damaged, please write "Damaged" in a blank space of "Date of Loss".

Leave a check mark in a circle.

Please ensure that **the signature is the same as the one in the rectangular box at the top of the page (Section C).**

In case of a child whose age is below 12 years old, a parent will sign on behalf of a child.

Please make sure to fill in **Date of Declaration.**

Section F and G, Page 3

F EMERGENCY CONTACT PERSONS		
FIRST CONTACT PERSON		
Surname <input type="text"/>	First Name <input type="text"/>	Middle Names <input type="text"/>
Street Number and Street name <input type="text"/> <input type="text"/>	Telephone Number Area Code Seven Digit Number <input type="text"/>	
Town, City and Parish/State <input type="text"/> <input type="text"/>	Relationship <input type="text"/>	
Country <input type="text"/>		
State <input type="text"/>	Postal or Zip Code <input type="text"/>	
SECOND CONTACT PERSON		
Surname <input type="text"/>	First Name <input type="text"/>	Middle Names <input type="text"/>
Street Number and Street name <input type="text"/> <input type="text"/>	Telephone Number Area Code Seven Digit Number <input type="text"/>	
Town, City and Parish/ State <input type="text"/> <input type="text"/>	Relationship <input type="text"/>	
Country <input type="text"/>		
State <input type="text"/>	Postal or Zip Code <input type="text"/>	

Section F will require *two emergency contacts*; at least one (1) must be from overseas.

G OFFICIAL CERTIFICATION (Please ensure that Sections A-F are completed before certifying this document)	
WARNING: IT IS AN OFFENCE TO MAKE A FALSE AND MISLEADING STATEMENT IN SUPPORT OF A PASSPORT APPLICATION	
I <input type="text"/>	
First Name	Middle Name(s)
Surname	Designation/Occupation
hereby certify that I have known <input type="text"/>	
Full Name of Applicant (in the case of a minor, the person giving consent) as stated on application.	
For(years) and that the information given is correct to the best of my knowledge and belief.	
Address of Certifying Official Building/Apartment Number and Name (if applicable) <input type="text"/>	Country <input type="text"/>
Street Number and Street name <input type="text"/> <input type="text"/>	Postal Code or Zip Code <input type="text"/>
Town, City and Parish/ State <input type="text"/> <input type="text"/>	Telephone Number Area Code Seven Digit Number <input type="text"/>
Signature of Certifying Official <input type="text"/>	Official Stamp or Seal (If any)
	Date of Certification (DD/MM/YYYY) <input type="text"/>

Do not fill in **Section G**.

Please ensure that Section G on Page 3 is duly certified (refer to Section 3.3. in Guidelines, affixed to the Passport form, for further information on the list of authorized officials).

