

Must have a 2D bar code. Use FORM FILLER online



U.S. Department of State

APPLICATION FOR A U.S. PASSPORT

OMB Control No. 1405-0004 Expiration Date: 04/30/2025 Estimated Burden: 85 Minutes

Use black ink only. If you make an error, complete a new form. Do not correct.

Select document(s) for which you are submitting fees:

- U.S. Passport Book, U.S. Passport Card, Both, Regular Book (Standard), Large Book (Non-Standard)

1. Name Last

TATE

First

PEPPER

Middle

2. Date of Birth (mm/dd/yyyy)

01 30 2019

3. Gender (Read Instruction Page 1)

M F X Changing gender marker? X Yes

4. Place of Birth (City & State if in the U.S. or City & Country as it is presently known)

CAIRO, MO

5. Social Security Number

000 00 0000

6. Email (See application status at passportstatus.state.gov)

PEPPER@GMAIL.COM

7. Primary Contact Phone Number

078-777-7777

8. Mailing Address Line 1: Street/RFD#, P.O. Box, or URB

31 COVEY WAY

Must be your UK Address

Address Line 2: (Include Apartment, Suite, etc. If applicant is a child, write "In Care Of" of the parent. Example: In Care Of - Jane Doe)

City

State

Zip Code

Country, (if outside the United States)

BRANDON

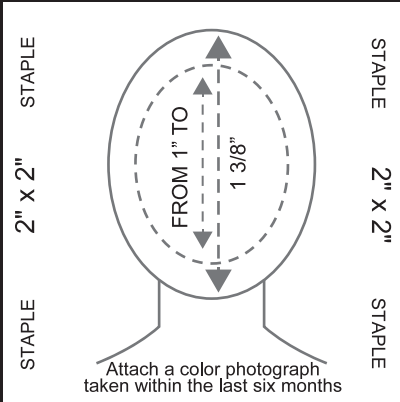
IP27 9HJ

UNITED KINGDOM

9. List all other names you have used. (Examples: Birth Name, Maiden, Previous Marriage, Legal Name Change. Attach additional pages if needed.)

A.

B.



STOP! CONTINUE TO PAGE 2 DO NOT SIGN APPLICATION UNTIL REQUESTED TO DO SO BY AUTHORIZED AGENT

Identifying Documents - Applicant or Mother/Father/Parent/Legal Guardian on Second Signature Line (if identifying minor)

- Driver's License, State Issued ID Card, Passport, Military, Other

Name

Issue Date (mm/dd/yyyy) Exp. Date (mm/dd/yyyy) State of Issuance

ID No Country of Issuance

Identifying Documents - Applicant or Mother/Father/Parent/Legal Guardian on Third Signature Line (if identifying minor)

- Driver's License, State Issued ID Card, Passport, Military, Other

Name

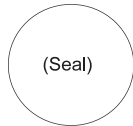
Issue Date (mm/dd/yyyy) Exp. Date (mm/dd/yyyy) State of Issuance

ID No Country of Issuance

I declare under penalty of perjury all of the following: 1) I am a citizen or non-citizen national of the United States and have not performed any of the acts listed under "Acts or Conditions" on page 4 of the instructions of this application (unless explanatory statement is attached); 2) the statements made on the application are true and correct; 3) I have not knowingly and willfully made false statements or included false documents in support of this application; 4) the photograph attached to this application is a genuine, current photograph of me; and 5) I have read and understood the warning on page 4 of the instructions to the application form.

Acceptance Agent (Vice) Consul USA

Passport Staff Agent



Signature of person authorized to accept applications

Date

By signing this form, I certify that I have provided the verbal oath and witnessed the applicant's/legal guardian's signature.

Agent ID Number

Print Facility Name/Location

Facility ID Number

Name of courier company (if applicable)

Applicant's Legal Signature - age 16 and older
Mother/Father/Parent/Legal Guardian's Signature (if identifying minor)

For Issuing Office Only Bk Card EF Postage Execution Other



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Name of Applicant (Last, First, & Middle) **TATE, PEPPER** Date of Birth (mm/dd/yyyy) **01/30/2019**

10. Parental Information  
Mother/Father/Parent - First & Middle Name (at Parent's Birth) **UNKNOWN** Last Name (at Parent's Birth) **UNKNOWN**

Date of Birth (mm/dd/yyyy) **UNKNOWN** Place of Birth (City & State if in the U.S. or City & Country as it is presently known) **UNKNOWN** Gender  M  F  X U.S. Citizen?  Yes  No

Mother/Father/Parent - First & Middle Name (at Parent's Birth) **UNKNOWN** Last Name (at Parent's Birth) **UNKNOWN**

Date of Birth (mm/dd/yyyy) **UNKNOWN** Place of Birth (City & State if in the U.S. or City & Country as it is presently known) **UNKNOWN** Gender  M  F  X U.S. Citizen?  Yes  No

11. Have you ever been married?  Yes  No If yes, complete the remaining items in #11.

Full Name of Current Spouse or Most Recent Spouse (Last, First & Middle) **UNKNOWN** Date of Birth (mm/dd/yyyy) **UNKNOWN** Place of Birth **UNKNOWN**

U.S. Citizen?  Yes  No Date of Marriage (mm/dd/yyyy) **UNKNOWN** Have you ever been widowed or divorced?  Yes  No Widow/Divorce Date (mm/dd/yyyy) **UNKNOWN**

12. Additional Contact Phone Number **UNKNOWN** 13. Occupation (if age 16 or older) **CHILDREN** 14. Employer or School (if applicable) **UNKNOWN**

15. Height **1ft. 0in.** 16. Hair Color **BLACK** 17. Eye Color **BROWN** 18. Travel Plans (If no travel plans, please write "none")  
Departure Date (mm/dd/yyyy) **UNKNOWN** Return Date (mm/dd/yyyy) **UNKNOWN** Countries to be Visited **UNKNOWN**

19. Permanent Address (Complete if P.O. Box is listed under Mailing Address or if residence is different from Mailing Address. Do not list a P.O. Box.)  
Street/RFD # or URB **UNKNOWN** Apartment/Unit **UNKNOWN**

City **UNKNOWN** State **UNKNOWN** Zip Code **UNKNOWN**

20. Your Emergency Contact (Provide the information of a person not traveling with you to be contacted in the event of an emergency.)  
Name **TOFFE TATE** Address: Street/RFD # or P.O. Box **COVEY WAY** Apartment/Unit **UNKNOWN**

City **HUNSTVILLE** State **MO** Zip Code **65267** Phone Number **636-464-6455** Relationship **BROTHER**

21. Have you ever applied for or been issued a U.S. Passport Book or Passport Card?  Yes  No If yes, complete the remaining items in #21.

Name as printed on your most recent passport book **UNKNOWN** Most recent passport book number **UNKNOWN** Most recent passport book issue date (mm/dd/yyyy) **UNKNOWN**

Status of your most recent passport book:  Submitting with application  Stolen  Lost  In my possession (if expired)

Name as printed on your most recent passport card **UNKNOWN** Most recent passport card number **UNKNOWN** Most recent passport card issue date (mm/dd/yyyy) **UNKNOWN**

Status of your most recent passport card:  Submitting with application  Stolen  Lost  In my possession (if expired)

**PLEASE DO NOT WRITE BELOW THIS LINE - FOR ISSUING OFFICE ONLY**

Name as it appears on citizenship evidence \_\_\_\_\_

- Birth Certificate SR CR City Filed: \_\_\_\_\_ Issued: \_\_\_\_\_  Sole Parent
- Nat. / Citz. Cert. USCIS USDC Date/Place Acquired: \_\_\_\_\_ A# \_\_\_\_\_
- Report of Birth Filed/Place: \_\_\_\_\_
- Passport C/R S/R See #21 #/DOI: \_\_\_\_\_
- Other: \_\_\_\_\_
- Attached: \_\_\_\_\_



P/C of Citz  P/C of ID  DS-71  DS-3053  DS-64  DS-5520  DS-5525  PAW  NPIC  IRL  Citz W/S

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