

CONSULATE GENERAL OF NIGERIA NIGERIA HOUSE

LOST PASSPORT FORM

FAMILY NAME		
FIRST/MIDDLE NAMES		
CURRENT ADDRESS		
TELEPHONE NO.	EMAIL ADDRESS	
DATE OF BIRTH	PLACE OF BIRTH	
LOST PASSPORT NO.	SEX	
PLACE OF ISSUE/ISSUING CENTER		
DATE OF ISSUE	EXPIRATION DATE	
APPLICANT'S LOCAL GOVERNMENT AREA (LGA)		
STATE OF ORIGIN	HOMETOWN	
**Issuance of new Passport is subject to approva	l from Nigeria Immigration Service, Abuja **	
Please attach following requirements to your applications	tion:	
1. Letter requesting for a Police Report.		
2. Photocopy of the first five (5) pages of your passpo	rt including the information/data page	
3. Copy of birth certificate/Declaration of Age		
4. Police Report		
5. Two (2) colored Passport photographs		
6. Copy of Alien Registration Card or Driver's License7. \$70.00 Post Office Money Order with effect from January 1, 2025.		
7. \$70.00 Post Office Money Order with effect from 18	allual y 1, 2023.	

MAJC

SIGNATURE: _____ DATE: _____

LOST PASSPORT FORM PAGE 2

NAME		
ADDRESS		
EXPLAIN BRIEFLY HOPE Please be guided with the WHAT was lost WHEN it got lost and HOW did you lose it?	OW THE PASSPORT GOT LOST: the questions of:	
POLICE STATION'S C	COMPLETE ADDRESS:	
Today's date:	Signature	
Please submit with:	2 Passport pictures Copy of old passport Copy of birth certificate/Age Declaration Copy of Alien Registration Card	
SIGNATURE:	DATE:	MAJC