



Consulate General of Liberia in New York
228 East 45th Street, Suite 602
New York, NY 10017

Application for Birth Affidavit

Photo

For Office use ONLY
BA No: _____
Date of Issuance: _____
Expiration Date: _____
Fee(s): _____
Money Order #: _____
D/C #: _____
Receipt No: _____

Last Name _____ First Name _____ MI _____ Title _____

Previous Name, if any: _____ Telephone # _____

Date of Birth _____ Gender Male Female Email: _____
Month/Day/Year

Place of birth: City/Town _____ County _____ Country _____

Present Address _____

City _____ State _____ Zip Code _____ Country _____ Phone # _____

How did you obtain Liberian Citizenship? Birth Naturalized

Father's Last Name _____ First Name _____ MI _____
Living Deceased

Father's Country of Origin _____ Father's Nationality _____
Birth Naturalized

Father's date of Naturalization _____
Month/ Day/Year

Mother's Last Name _____ First Name _____ MI _____
Living Deceased

Mother's Country of Origin _____ Mother's Nationality _____
Birth Naturalized

Mother's date of Naturalization _____
Month/Day/Year

Name of Next of Kin _____ Relationship to Next of Kin _____

Telephone # of Next of Kin _____ Email Address of Next of Kin _____



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Application for Birth Affidavit (Page 2)

Emergency Contact Person: Last Name _____ First Name _____ MI _____ Title _____

Emergency Contact Person Email/Phone:

Proof of Citizenship: Birth Certificate Court Affidavit

Permanent place of residence in Liberia

Address of Employer

Have you obtained a Liberian Passport before? Yes No If Yes, Passport number _____
Date of Issuance _____

List below names, relationship and addresses of two persons who can vouch for your citizenship and character

Name _____ Address _____ Relationship _____

Name _____ Address _____ Relationship _____

Physical Description:

Color of eyes _____ Height _____ Color of Hair _____

Mustache? Yes No Beard? Yes No Complexion _____

Special Peculiarities _____

I hereby certify and declare that each of the above particulars stated by me is true to the best of my knowledge and ability and that I would be prosecuted for perjury if found guilty of false information. Any misleading information given will disqualify me from obtaining a Birth Affidavit.

The Consulate reserves the right to request additional information in the processing of this application.

Signature of Applicant Date _____
Month/Day/Year

Signature of person filling in form if not same as applicant Date _____

Approved By: _____
Consular Officer



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Application for Birth Affidavit (Page 3) Requirements

Birth Affidavit:

1. Proof of citizenship such as:
 - a. Liberian passport.
 - b. Refugee Documents.
 - c. Notarized Letter from both parents certifying that you were born in Liberia or to Liberian parents
2. Two (2) color passport size photos (must be taken in front of white background, no sleeveless clothing)
3. A completed Application Form
4. Processing FEE of Seventy-five U.S Dollars (\$75.00).
Payable in **Money Order** only to **Liberia Consulate**.

Note: Applicants outside the United States need to purchase Money Order from an American-affiliated Bank

- Same day processing fees for documents is an additional Seventy Five U.S Dollars (\$75) each.
(If dropped off before 12 pm, pick up is between 2-3pm)
- Next day processing fees for documents is an additional Fifty U.S Dollars (\$50) each

NOTE: In the event that applicant cannot apply in person, they must send a written authorization stating who will process on their behalf or send a United States Postal Service (USPS) self-stamped addressed envelope (PRIORITY MAIL EXPRESS) along with **ALL** of the above requirements in order to ensure the return of processed document (s).