

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

Application for Laissez Passer

		For Office use ONL Y	
Photo		LP No:	
		Date of Issuance:	
		Expiration Date:	
		Fee(s):	
		Money Order No:	
		D/C #:	
		Receipt No:	
Last Name	First Name	MITitle	
Previous Name, if any:		Telephone #	
Date of Birth	Gender Male □ Fem:	ale	
Month/Day/Year	Gender Ware 11 Tenns	aic Linaii.	
1.1511111 2 uyi 1 01 11			
Place of Birth: City/Town	County	Country	
D (A11			
Present Address			
CityStateZip C	CodeCountry	Phone #	
Profession/Occupation to be used in I	Laissez Passer		
How did you obtain Liberian Citizens	ship? Birth \square Naturalized \square		
Father's Last NameLiving □ Deceased □	First Name	MI	
Father's Country of Origin Birth □ Naturalized □	Father's Natio	nality	
Father's date of Naturalization	Month/ Day/Year		
	Monui Day I Cai		
Mother's Last Name Living □ Deceased □	First Name	MI	
Living Deceased			
Mother's County of Origin Birth □ Naturalized □	Mother's Nation	nality	
Mother's Date of Naturalization			
Mo	onth/Day/Year		
Name of Next of Kin	Relationship to Next of Kin		
Telephone # of Next of Kin	n Email Address of Next of Kin		



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Application for Laissez Passer (Page 2)

Address of Employer Have you obtained a Liberian Passport before? Yes No If Yes, passport number	Emergency Contact Pers	on: Last Name	First Name	MII I itie _
Address of Employer Have you obtained a Liberian Passport before? Yes □ No □ If Yes, passport number	Address of Emergency C	Contact Person		
Have you obtained a Liberian Passport before? Yes □ No □ If Yes, passport number	Proof of Citizenship: Bir	th Certificate Court Affidavit		
Have you obtained a Liberian Passport before? Yes □ No □ If Yes, passport number	•			
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 knowle 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 Liberia traveling document. Please be advised that the Laissez Passer is used to travel to Liberia ONLY The Consulate reserves the right to request additional information in the processing of this application. Date Signature of Applicant Month/Day/Year	Address of Employer			
Name	•		If Yes, passport number	
Name Address Relationship	List below names, relation	onship and addresses of two persor	ns who can vouch for your citize	nship and character
Signature of Applicant Month/Day/Year	Name	Address	Relation	ship
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 knowle 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 Liberia traveling document. Please be advised that the Laissez Passer is used to travel to Liberia ONLY The Consulate reserves the right to request additional information in the processing of this application. Date Month/Day/Year	Name	Address	Relations	hip
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 knowle 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 Liberia traveling document. Please be advised that the Laissez Passer is used to travel to Liberia ONLY The Consulate reserves the right to request additional information in the processing of this application. Date Month/Day/Year	Physical Description:			
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Date	and ability and that I wo information given will di	ould be prosecuted for perjury if for six and	ound guilty of false information. eria traveling document.	
Signature of Applicant Month/Day/Year	The Consulate reserves t	he right to request additional info	ormation in the processing of this	s application.
	Cianatana af A anti-ana	:	Date	
	Signature of Applicant		•	
Date Signature of Applicant person filling in form if not same as applicant	Signature of Applicant pe	rson filling in form if not same a	Dates applicant	
			Approved By:	
Approved By:			C	onsular Office



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Application for Laissez Passer (Page 3) Requirements

Laissez Passer Requirement

- 1. Copy of Liberian Passport (If you don't have passport the copy of birth certificate or refugee documents or I-94 Form)
- 2. Copy of Airline tickets or Itinerary (Please check with airline if Laissez Passer can be used to travel)
- 3. Two (2) color passport size photos (must be taken in front of white background, no sleeveless clothing)
- 4. Completion of Application Form.

Processing FEE of Seventy-five U.S Dollars (\$75.00).

Payable in Money Order to the order of Liberia Consulate.

Note: Applicants outside the United States need to purchase Money Order from an Americanaffiliated 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 by 2-3 pm)
- -Next day processing fees for documents is an additional Fifty U.S Dollars (\$50) each.

Note: Additional requirements for Minor (17 Yrs. Old and below)

- **A.** Original Copy of Birth Certificate
- **B.** Copy of Vaccination Records
- C. Notarized letter from both parents requesting for the issuance of Laissez Passer (Travel Document) (Both parents must sign) If only one parent/guardian is traveling with minor, explain in the letter. If parent has full custody, attach copy of custody papers. If parents are not traveling with minor, state in letter who will be responsible for the minor (Attached copies of their passport and their (Itinerary/flight information)
- **D.** Each parent must provide notarized letter in the event that one parent has travelled during the time of processing. If one parent has full custody, kindly attach original custody documents and provide original notarized letter.
- **E**. If one parent is represented on the birth certificate, that parent must provide an original notarized letter requesting the issuance of visa.

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).