

U.S. PASSPORT RENEWAL FROM CANADA BY MAIL

IMMIGROUP ORDER FORM

INSTRUCTIONS

Read all instructions and follow carefully

1. Please complete the order form and application forms included herein. Make sure to include your telephone number and email address where you can be contacted.
2. Fax or scan and email all forms and documents in the document checklist to our office for review at 416-640-2650 or info@immigroup.com
3. You will be contacted within 1 - 2 business days regarding your application. **If you have not been contacted after 2 business days, please contact our office at 1-866-760-2623 to confirm we have received your order.**
4. After we have reviewed your forms and documents, we will advise you to send the original forms and copies of documents to our office.
5. Your passport will be mailed to you at your address in Canada.

DOCUMENT CHECKLIST

- IMMIGROUP ORDER FORM**
- COMPLETED DS-82**
(Duly completed and signed)
- ORIGINAL MOST RECENT PASSPORT BOOK OR CARD**
- 2 U.S. PASSPORT PHOTOS**
- CERTIFIED COPY OF NAME CHANGE**
(if applicable)

ATTENTION Only complete this form if:

- you are 18 years of age or older;
- your most recent passport was issued when you were at least 16 years old;
- your most recent passport has been expired less than 5 years
- the recent passport was issued less than 15 years ago
- your most recent passport was issued for the full validity period (5 or 10 years);
- you can submit your most recent passport with your application;
- you are not requesting any change to the data in your passport, accept for a name change, supported by an original document.

FEES AND PROCESSING TIMES

<p>U.S. Passport through descent service</p> <ul style="list-style-type: none"> • Full rights of a U.S. national • Second passport is the best insurance • 10% discount when you send in two applications <p>Do you still not have a Canadian Passport? Let us help you get your Right of Citizenship</p> <ul style="list-style-type: none"> • You can lose your PR but can't lose your Citizenship • No more PR card renewals • 10% discount when you send in two applications 	<p style="text-align: center;"><u>PASSPORT RENEWAL</u></p> <p><input type="checkbox"/> \$385 USD</p> <p>Including: \$225 IMMlgroup service fee \$40 courier fee \$110 passport fee \$10 money order fee</p> <p><input type="checkbox"/> Get the passport card as well for an additional \$30</p> <p>Average processing time is 4-6 weeks, subject to change without notice.</p>	<p style="text-align: center;"><u>EXPEDITED/LOST</u></p> <p><input type="checkbox"/> Add \$175 USD to expedite the process to get your passport in 3 weeks instead of 6</p> <p>Average processing time is 3 weeks, subject to change without notice</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

CONTACT INFORMATION

Email Address:

Phone Number:

CREDIT CARD INFORMATION

We accept Visa, Mastercard, American Express, bank drafts, and bank transfers

Cardholder Name:

Card Number:

Expiry Date (mm/yy) CVV Code:

I agree to pay these charges
 Cardholder Signature:

DISCLAIMER

Applicant must sign below

* By signing below I assert that I have read and agreed to the terms and conditions as listed on <https://www.immigroup.com/terms-conditions> and agree to the following conditions:

- * Immigroup Inc is not responsible for applications that are rejected.
- * All fees are non-refundable once applications are submitted to the government.
- * I agree to being charged the total fees corresponding with my required service
- * I assert that I am applying for my documents using Immigroup as my representative
- * Government fees can be higher than stated on this application

SIGN HERE:

Name of Applicant (Last, First & Middle)	Date of Birth (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>

12. Height	13. Hair Color	14. Eye Color	15. Occupation	16. Employer or School (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

17. Additional Contact Phone Numbers
<input type="text"/> <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> _____
<input type="text"/> <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> _____

18. Permanent Address: If P.O. Box is listed under Mailing Address <u>or</u> if residence is different from Mailing Address.			
Street/RFD # or URB (No P.O. Box)			Apartment/Unit
<input type="text"/>			<input type="text"/>
City	State	Zip Code	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

19. Emergency Contact - Provide the information of a person not traveling with you to be contacted in the event of an emergency.				
Name	Address: Street/RFD # or P.O. Box			Apartment/Unit
<input type="text"/>	<input type="text"/>			<input type="text"/>
City	State	Zip Code	Phone Number	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

20. Travel Plans		
Departure Date (mm/dd/yyyy)	Return Date (mm/dd/yyyy)	Countries to be visited
<input type="text"/>	<input type="text"/>	<input type="text"/>

**STOP! YOU HAVE COMPLETED YOUR APPLICATION
BE SURE TO SIGN AND DATE PAGE ONE**

WHERE DO I MAIL THIS APPLICATION?


If applying in the United States or Canada:

FOR ROUTINE SERVICE (If you live in CA, FL, IL, MN, NY, or TX): National Passport Processing Center P.O. Box 640155 Irving, TX 75064-0155	FOR ROUTINE SERVICE (If you live in any other state or Canada): National Passport Processing Center P.O. Box 90155 Philadelphia, PA 19190-0155	FOR EXPEDITED SERVICE (Additional Fee, any state or Canada): National Passport Processing Center P.O. Box 90955 Philadelphia, PA 19190-0955
-----------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------

Because of the sensitivity of the enclosed documents, Passport Services recommends using trackable mailing service when submitting your application.

If applying outside the United States or Canada:

United States citizens residing outside the U.S. or Canada **CANNOT** submit this form to domestic addresses listed above. Such applicants should visit www.usembassy.gov to find the nearest U.S. Embassy or Consulate for procedures for applying outside the United States.


* DS 82 C 08 2013 2 *