

## 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](mailto: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 at  
**2558 Danforth Avenue, Suite 202, Toronto, ON M4C 1L3**
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

<u>REVIEW ONLY</u>	<u>PASSPORT</u>	<u>EXPEDITED</u>
<input type="checkbox"/> <b>\$169.50 USD</b> HST included <b>Immigroup will:</b> - review your application; - suggest changes to your application; - review your changes.	<input type="checkbox"/> <b>\$329.50 USD</b> <b>Including:</b> \$150 Immigroup service fee \$19.50 HST \$40 courier fee \$110 passport fee \$10 money order fee <input type="checkbox"/> Get the passport card as well for an additional \$30 Average processing time is 4-6 weeks, subject to change without notice.	<input type="checkbox"/> Add <b>\$173 USD</b> to expedite the process to get your passport in 3 weeks instead of 6  Average processing time is 3 weeks, subject to change without notice

**All fees charged using current exchange rate.**

#### 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 <http://www.immigroup.com/disclaimer.php> and agree to the following conditions:
- \* Immigroup Inc. is not responsible for documents or passports lost by courier companies or any government office.
- \* If you require a phone consultation, you will be charged an additional \$169.50
- \* 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
- \* A minimum \$42.50 cancellation fee will apply to any service canceled after work has begun

SIGN HERE:

U.S. PASSPORT RENEWAL APPLICATION FOR ELIGIBLE INDIVIDUALS

OMB CONTROL NO. 1405-0020
OMB EXPIRATION DATE: 12-31-2016
ESTIMATED BURDEN: 40 MIN

Please Print Legibly Using Black Ink Only

Attention: Read WARNING on page 1 of instructions

Please select the document(s) for which you are applying:

- U.S. Passport Book
U.S. Passport Card
Both
28 Page Book (Standard)
52 Page Book (Non-Standard)

Note: The 52 page option is for those who frequently travel abroad during the passport validity period, and is recommended for applicants who have previously required the addition of visa pages.

1. Name Last

Name fields: Last, First, Middle

End. #, Exp., DOTS Code fields

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

3. Sex M F

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

5. Social Security Number

6. Email Address (e.g., my\_email@domain.com)

7. Primary Contact Phone Number

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

Address Line 2: Clearly label Apartment, Company, Suite, Unit, Building, Floor, In Care Of or Attention if applicable.

City State Zip Code Country, if outside the United States

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

A. B.

10. Passport Book and/or Passport Card Information

Your name as printed on your most recent U.S. passport book and/or passport card

Most recent passport book number Issue date (mm/dd/yyyy)

Most recent passport card number Issue date (mm/dd/yyyy)

11. Name Change Information Complete if name is different than last U.S. passport book or passport card

- Changed by Marriage Place of Name Change (City/State) Date (mm/dd/yyyy)
Changed by Court Order

Please submit a certified copy. (Photocopies are not accepted!)

2" X 2" STAPLE Attach a color photograph taken within the last six months

CONTINUE TO PAGE 2

YOU MUST SIGN AND DATE THE APPLICATION IN THE DESIGNATED AREA BELOW

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, since acquiring U.S. citizenship or nationality, performed any of the acts listed under "Acts or Conditions" on the reverse side of this application...

x Applicant's Legal Signature

Date

FOR ISSUING OFFICE ONLY

- PPT BK C/R PPT BK S/R PPT CD C/R PPT CD S/R

Marriage Certificate Date of Marriage/Place Issued:

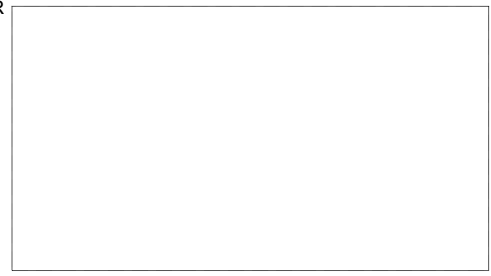
Court Order Date Filed/Court:

From

To:

Other:

Attached:



For Issuing Office Only Bk Fee Cd Fee EF Postage Other



\* DS 82 C 08 2013 1 \*

Name of Applicant (Last, First & Middle) Date of Birth (mm/dd/yyyy)

12. Height    13. Hair Color    14. Eye Color    15. Occupation    16. Employer or School (if applicable)

17. Additional Contact Phone Numbers

Home  Cell  Work   Home  Cell  Work

18. Permanent Address: If P.O. Box is listed under Mailing Address **or** if residence is different from Mailing Address.

Street/RFD # or URB (No P.O. Box) Apartment/Unit

City State    Zip Code

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

City State    Zip Code    Phone Number    Relationship

20. Travel Plans

Departure Date (mm/dd/yyyy)    Return Date (mm/dd/yyyy)    Countries to be visited

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



\* DS 82 C 08 2013 2 \*