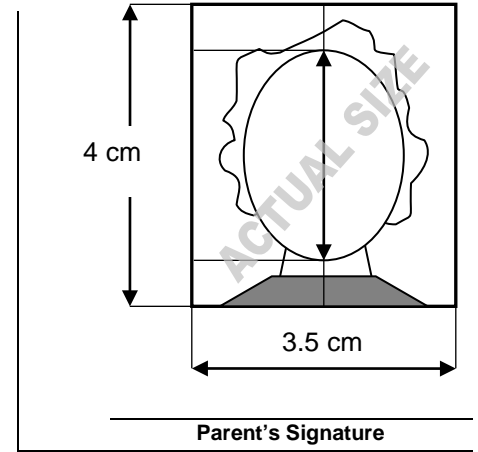




MINOR PASSPORT APPLICATION (UNDER 18)

This personal declaration, given in accordance with articles 46 and 47 of D.P.R. n. 445/2000, does not require signature authentication.

b. 2 PHOTOS (max 6 months)



a. MINOR

The Italian citizen:

1. _____
Given name/s

2. _____
Last name

3. _____
Place of birth (city, province/territory/state, country)

4. _____
Date of birth (dd/mm/yyyy)

Sex F M

Height _____ cm _____ ft. in.

4.1. Eye colour Blue Brown Grey Black Green

5. Address _____
Number, street _____ Apartment _____
City, province/territory/state, country _____ Postal code _____

6. Phone _____
Daytime phone number _____ Cell Home Work

7. Other citizenship/s Y N If yes, which _____

8. Previous Italian passport Y N If yes, attach copy (pag. with photo, signature, issuing office)

Parent's Signature

Email

c. PARENTS' CONSENT (art. 3 L. 1185/1967)

9. The undersigned consents to the issuing of a passport to her/his minor child.

9.1. **Mother** (European Union citizen Y N)

9.2. **Father** (European Union citizen Y N)

Given name/s _____

Last name _____

Place of birth (city, province/territory/state...
...country) _____

Date of birth (dd/mm/yyyy) _____

Given name/s _____

Last name _____

Place of birth (city, province/territory/state...
...country) _____

Date of birth (dd/mm/yyyy) _____

I, the undersigned, fully aware that untruthful statements, forgery and use of false documents, will be prosecuted by law as per article 76 D.P.R. n. 445/2000, hereby declare that the above information is accurate and true. I hereby also declare to be fully aware that the personal data collected will be used, including in its digital form, exclusively for the purpose for which this application is submitted, in accordance with D.Lgs n. 196/2003.

→ _____
Signature

_____ dd/mm/yyyy
Place and date

→ _____
Signature

_____ dd/mm/yyyy
Place and date

For official use only

Dichiarazione ricevuta per via telematica (ex art 38 D.P.R. 445/2000)

ALL./AIRE SÌ NO FOTO SÌ NO Si attesta che la foto b. risponde alle sembianze del minore NASCITA SÌ NO
ASS. 10.1. SÌ NO ASS. 10.2. SÌ NO

Firma dell'impiegato incaricato _____

Data _____