



U.S. Department of State Courier Drop-Off List for U.S. Passport Applications

INSTRUCTIONS

1. Please provide all required information on this form. Submit one drop-off list for each service type.
2. This form must be attached, instruction side facing up, to each sealed group of applications when submitted to the U.S. Department of State passport agency's drop-off box.
3. If submitting documentation in response to agency requests for more information ("applicant response" or "AR") or a passport containing incorrect identifying information for a correction ("rewrite"), please check the appropriate box under the form field on one of the three spaces provided per drop-off list.

USE OF THIS FORM

The information collected on this form is used to track U.S. passport applications submitted by private courier companies to the U.S. Department of State passport agency's drop-off box. This form is used to identify the courier company, the courier employee, the receiving U.S. Department of State passport agency, and the applications received.

FOR INFORMATION AND/OR QUESTIONS

For information or questions, please visit our website at travel.state.gov. In addition, contact the National Courier Liaison by email at NationalCourierLiaison@state.gov or by phone at 202-485-6532 Monday - Friday 8:00 a.m.- 5:30 p.m. Eastern Standard Time. You may also send correspondence to the following address:

ATTN: Customer Service Operations Officer
U.S. Department of State
CA/PPT/S/PMO/CS
44132 Mercure Cir
P.O. Box 1199
Sterling, Virginia 20166-1199

PAPERWORK REDUCTION ACT STATEMENT

The public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time required for searching existing data sources, gathering the necessary data, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: AATN: PPT Forms Officer, U.S. Department of State, Bureau of Consular Affairs, Passport Services, Office of Legal Affairs and Law Enforcement Liaison, 44132 Mercure Cir, P.O. Box 1227 Sterling, Virginia 20166-1227.



**U.S. Department of State
COURIER DROP-OFF LIST
FOR U.S. PASSPORT APPLICATIONS**

OMB Approval No: 1405-XXXX
Expiration Date: XX-XX-XXXX
Estimated Burden Time: 10 Minutes

Note: Application limits and service types are set by each U.S. Department of State passport agency. Couriers must abide by each passport agency's guidelines.

Passport Agency:		Date:		
Courier Company:		Service Type:	<input type="checkbox"/> Same Day <input type="checkbox"/> Three Day <input type="checkbox"/> Two Day <input type="checkbox"/> Mail Out	
Applicant's Last Name	Applicant's DOB	Form	Departure	Foreign Visa (Y/N)
<i>Example: Doe</i>	<i>12/31/1986</i>	<i>DS-82</i>	<i>1/8/2012</i>	<i>No</i>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
		<input type="checkbox"/> AR <input type="checkbox"/> Rewrite		
		<input type="checkbox"/> AR <input type="checkbox"/> Rewrite		
		<input type="checkbox"/> AR <input type="checkbox"/> Rewrite		

I, the undersigned, have delivered passport applications and/or related documents for the above listed applicants on the date written at the top of this form.

Name of Courier Employee:		Signature:	
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Department of State Use Only: *Initial and Date*

Intake:		Mail Open:	
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