



KENYA EMBASSY, STOCKHOLM

CHECKLIST FOR APPLYING FOR A REPLACEMENT OF A MUTILATED PASSPORT

This list gives an overview of the documents required in order to start the application process.

Tick and attach the checklist with your application.

| | YES | NO |
|--|--------------------------|--------------------------|
| 1. Two (2) Form 19 duly completed and signed. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The original mutilated passport to be replaced. | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Copies of the Kenyan National Identity Card and Birth Certificate. | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. An affidavit of the circumstances surrounding the mutilation or damage of the passport. | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. A self-explanatory letter by the applicant explaining circumstances of mutilation. | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Three (3) colored Passport size photographs of the applicant with one of the photos duly certified as true likeness of the applicant by the recommender. | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. A copy of Kenyan National Identity card or Passport from the Recommender. | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Proof of processing fee of SEK 1000 paid to: - Name of Bank Account: - Kenya Embassy Stockholm a) Payments in Sweden: - PLUS Giro Bank, Account Number: 663966-0 OR b) International Payments (Denmark, Finland, Iceland, & Norway): - • IBAN No: SE3495000099602606639660 • SWIFT/BIC Address: NDEASESS • Nordea Bank Box 10571, Stockholm. | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. A self-addressed envelope with sufficient stamps, international coupons or check further information on the postal charges fee chart provided. | <input type="checkbox"/> | <input type="checkbox"/> |

THANK YOU