TRAVCO Inc. www.travco-inc.com

 1441 Broadway, 6th Floor

 New York, NY 10018

 P: (800) 987-2826
 FAX: (212) 624-9274



Letter of Authorization

Please carefully read the information below before completing this Letter of Authorization.

An individual's personal information cannot be released by the U.S. government to another party without the written consent of the individual under the provision of the **Privacy Act of 1974**

(5 USC 552a)

As a result, an employee at a U.S. passport agency cannot discuss the details of your passport application with a third party without your written consent.

Please check all that apply:

- I authorize the company stated below to submit my passport application to a passport agency and pick up the passport from a U.S. passport agency on my behalf.
- I authorize the passport agency to disclose to the company listed below any requests for further documentation and/or information that may arise in connection with my passport application, and I authorize the company to respond to such requests under my direction.
- I do not authorize the passport agency to disclose to the company listed below any requests for further documentation and/or information that may arise with my passport application. I want the concerns maters other than the date on which the passport will be ready for pick up from the passport agency.

Applicant Information

Note: All of the information below may ONLY be filled out by the applicant, parent, legal guardian, or person legally acting in loco parentis.

Applicant Name:		
	(Last Name, First Name, Mide	dle Name)
Applicant Phone:	Date:	
	(Area Code-XXX-XXXX)	(MM-DD-YYYY)
Courier Company Name:	TRAVCO.COM	
Applicant Signature:		
(If the applicant is under the parentis must sign)	age of 16 the parent(s), legal guardian(s),	or persons legally acting in loco