

SPECIAL INSTRUCTIONS: _

VIP PASSPORT SERVICES, INC. 2012 Louisiana Street Houston, Texas 77002

713-659-8472





WORK ORDER REQUEST FORM

TRAVELER INFO:				DON'T FORGET
TRAVELER NAME				<u>DON FIORGEI</u>
TRAVELER DATE OF BIRTH				TO EMAIL YOUR
DATE OF U.S. DEPAR	RTURE			DOCUMENTS TO OUR
DATE PASSPORT IS N				OFFICE FOR OUR COMPLIMENTARY
VIP FILE LOCATOR N				PASSPORT/VISA
PASSPORT SERVICES	3	□ 4-7 BUSINES	SYAU 2	PRE-CHECK!
PROCESS SPEED		4 / 0001112	35 D/ (15	
BILLING INFORMA	ATION 🗖	(CHECK BOX IF SAM	IE AS SHIPPING)	
CONTACT & COMPANY I	NAME			
ADDRESS (STREET, CITY, STA	ATE, ZIP)			
PHONE NUMBER				
CELL NUMBER				
EMAIL				
P.O. OR BILLING REF#:				
RETURN SHIPPING	S INFORM	ATION \Box (Chec	K BOX TO WAIVE SI	GNATURE)
CONTACT & COMPANY I	NAME			
ADDRESS (STREET, CITY, STA	ATE, ZIP)			
PHONE NUMBER				
CELL NUMBER				
EMAIL				
METHOD OF PAYMENT				
☐ CREDIT CARD	CARD NUME	BER	EXP. DATE	CVV CODE
SIGNATURE OF CARD HOLDER AUTH. AMOL			NT \$	
☐ MONEY ORDER	□ C	ASHIER'S CHECK	□ COMPAN	Y CHECK



2012 Louisiana Street Houston, Texas 77002 713-659-8472





SECOND LIMITED U.S. PASSPORT (ADULT)

PLEASE FORWARD THIS SHEET WITH ALL THE REQUIREMENTS TO THE ADDRESS LISTED ABOVE

VIP PASSPORT SERVICES, INC FEES:

PLEASE MARK THE APPROPRIATE BOX AND ADD THE FEES BELOW FOR THE SERVICE YOU HAVE REQUESTED:

□ \$295.00.... 4 – 7 BUSINESS DAY RUSH – RESERVATION REQUIRED

FEES PER PERSON		
VIP SERVICE FEE:	\$295.00	
□ PASSPORT BOOK FEE:		
MONEY ORDER FEE:	\$6.00	
RETURN SHIPPING FEE: SEE * BELOW		
TOTAL: (NO PERSONAL CHECKS)		

RETURN SHIPPING FEES			
(CHECK ONE)			
□ PRIORITY LETTER	\$45.00		
☐ 2-DAY LETTER	\$37.50		
☐ 3-DAY LETTER	\$27.50		
□ SATURDAY	\$85.00		
☐ 1 ST OVERNIGHT	\$95.00-\$145.00		
☐ LOCAL PICK UP	CALL FOR QUOTE		
□ LOCAL DELIVERY	CALL FOR QUOTE		
☐ AIRPORT DLVY	CALL FOR QUOTE		

^{*}FEDEX WILL CHARGE ADDITIONAL FEES FOR ALL RESIDENTIAL DELIVERIES.

IMPORTANT NOTE: PLEASE BE ADVISED THAT THE U.S. PASSPORT OFFICE ISSUES PASSPORTS ACCORDING TO YOUR DEPARTURE DATE. A PROCESSING TIME OF 8 DAYS OR LESS IS NOT ALWAYS AVAILABLE AND RESERVATIONS ARE REQUIRED. OUR COMPANY IS ALLOWED TO SUBMIT APPLICATIONS TO THE PASSPORT OFFICE EACH DAY AT 7:15 AM. IN ORDER TO INSURE YOUR REQUEST IS SUBMITTED ON-SCHEDULE, PLEASE SEND YOUR APPLICATION BY PERSONAL DELIVERY OR BY AN OVERNIGHT COURIER TO ARRIVE AT LEAST ONE BUSINESS DAY PRIOR TO YOUR SCHEDULED RESERVATION. ANY DOCUMENTS RECEIVED AFTER CLOSE OF BUSINESS THE DAY BEFORE A RESERVED SUBMISSION IS SCHEDULED MAY BE SUBJECT TO POSSIBLE DELAY OF SUBMISSION. **IF YOU ARE REQUESTING A RESERVATION FOR A PROCESSING OF LESS THAN 8 BUSINESS DAYS PLEASE EMAIL A COPY OF ALL YOUR DOCUMENTS TO INFO@VIPPASSPORTS.COM AND THEN CALL OUR OFFICE SO THAT WE MAY REVIEW THE DOCUMENTS, ADD YOUR NAME TO THE RUSH PROCESS LIST AND GIVE YOU SHIPPING INSTRUCTIONS. YOU WILL BE GIVEN A VIP RESERVATION/FILE LOCATOR NUMBER TO HOLD YOUR PLACE IN THE LINEUP FOR VIP TO SUBMIT YOUR APPLICATION ACCORDINGLY. BE SURE TO LIST THE RESERVATION NUMBER ON THE WORK ORDER. FAILURE TO FOLLOW ANY OF THESE INSTRUCTIONS MAY CAUSE A DELAY. VIP SERVICES IS NOT RESPONSIBLE FOR DELAYS BEYOND OUR CONTROL. IF IN EVENT THE PASSPORT OFFICE DENIES YOUR APPLICATION, VIP SERVICE FEES ARE NON-REFUNDABLE AND WILL BE CHARGED ACCORDING TO ORIGINAL REQUEST. AFTER THE APPLICATION HAS BEEN SUBMITTED TO THE PASSPORT OFFICE AND THEY PUT THE APPLICATION INTO SUSPENSE THERE WILL BE AN ADDITIONAL VIP SERVICE FEE OF \$50.00 TO SUBMIT THE ADDITIONAL DOCUMENTS AND MONITOR THE PROCESS UNTIL COMPLETION.

COMMENTS:			
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-			

REVISED: 4-29-2024 (EL)



2012 Louisiana Street Houston, Texas 77002 713-659-8472





SECOND LIMITED U.S. PASSPORT REQUEST

SECOND LIMITED PASSPORTS ARE NOT ISSUED FOR CONVENIENCE; THEY ARE ISSUED SOLELY AT THE DISCRETION OF THE PASSPORT SUPERVISOR. IN CERTAIN CASES, A DS11 PASSPORT APPLICATION MAY NEED TO BE SUBMITTED.

THE TWO REASONS WHY A SECOND LIMITED PASSPORT WOULD BE ISSUED ARE:

- YOU HAVE MORE THAN ONE BUSINESS TRIPS THAT REQUIRE A VISA AND YOU
 WILL BE LEAVING THE UNITED STATES BEFORE YOUR VISA CAN BE OBTAINED.
 THEREFORE YOU CAN TRAVEL WITH YOUR CURRENT PASSPORT WHILE
 OBTAINING A VISA IN YOUR SECOND LIMITED PASSPORT or
- YOU WILL BE TRAVELING TO TWO COUNTRIES THAT ARE IN POLITICAL/RELIGIOUS CONFLICT WITH EACH OTHER.

IF EITHER OF THE ABOVE CRITERIA APPLY TO THE APPLICANT, PLEASE SUBMIT THE FOLLOWING:

- 1.) CLICK HERE TO COMPLETE THE GOVERNMENT PASSPORT RENEWAL APPLICATION (DS-82) ONLINE. PLEASE MAKE SURE YOU SIGN IT (NO ELECTRONIC SIGNATURE ACCEPTED)
- 2.) ONE (1) COLOR PASSPORT TYPE PHOTOGRAPH NO GLASSES (2x2). THE HEAD IS MEASURED FROM BOTTOM OF CHIN TO THE TOP OF THE HAIRLINE AND SHOULD BE BETWEEN 1 INCH AND 1 3/8 INCHES, TAKEN WITHIN THE PAST THREE (3) MONTHS. BE SURE THAT THE PHOTOGRAPH IS TAKEN WITH A WHITE BACK GROUND. CLICK HERE FOR MORE GUIDANCE ON PHOTO SPECIFICATIONS. THEY CANNOT BE IDENTICAL TO THE PHOTOGRAPH IN YOUR CURRENT PRIMARY PASSPORT.
- 3.) ONE (1) VALID PRIMARY U.S. PASSPORT
 - MUST HAVE AT LEAST TWO (2) YEARS OF REMAINING VALIDITY. IF IT DOES NOT HAVE AT LEAST TWO (2) OR MORE YEARS, YOU MAY BE REQUIRED TO RENEW IT BEFORE OBTAINING A SECOND PASSPORT.
- **4.) DEPARTMENT OF STATE FEE**: \$212.05 (MADE PAYABLE TO "U.S. DEPARTMENT OF STATE")
- 5.) ONE (1) COMPANY LETTER, ON ORIGINAL LETTERHEAD, REQUESTING THAT A SECOND LIMITED PASSPORT BE ISSUED (SEE BELOW FOR THE EXAMPLE)
 - * SEE BELOW FOR EXAMPLE OF COMPANY LETTER IF THERE IS AN ENTRY/EXIT STAMP FROM ISRAEL IN THE APPLICANT'S PRIMARY PASSPORT.

CONTINUED →



2012 Louisiana Street Houston, Texas 77002 713-659-8472





- 6.) ONE (1) COMPELTED ATTACHMENT "A" FORM (IF NEEDING PASSPORT DUE TO VISA PROCESSING TIME RESTRICTIONS)
- 7.) ONE (1) COMPLETED HN-5 FORM (IF NEEDING PASSPORT DUE TO CONFLICTING COUNTRIES)
- 8.) ONE (1) LETTER FROM APPLICANT, REQUESTING THAT A SECOND LIMITED PASSPORT IS ISSUED. (SEE BELOW FOR THE EXAMPLE)
 - * SEE BELOW FOR THE EXAMPLE OF INDIVIDUAL LETTER IF THERE IS AN ENTRY/EXIT STAMP FROM ISRAEL IN THE APPLICANT'S PRIMARY PASSPORT
- 9.) ONE (1) TRAVEL ITINERARY SUPPORTING THE INTERNATIONAL DESTINATIONS AS STATED IN REQUEST LETTER(S).
- 10.) FIVE (5) AUTHORIZATION LETTERS THIS ALLOWS VIP PASSPORT SERVICES, INC, EXECUTIVE PASSPORT & VISA SERVICE, PASSPORT PHOTOS TO GO, JUST PASSPORTS, AND/OR PASSPORT EXPRESS TO DISCUSS THE STATUS OF THE APPLICATION AND COLLECT THE PASSPORTS ON YOUR BEHALF. ALL OF THESE WILL NEED TO BE COMPLETED AND SIGNED (NO ELECTRONIC SIGNATURES ACCEPTED)

NOTE: PASSPORT CARDS WILL NOT BE ISSUED WHEN REQUESTING A SECOND LIMITED PASSPORT. THEY MUST BE REQUESTED INDEPENDENTLY OR WHEN APPLYING FOR A PRIMARY RENEWAL OR FIRST TIME PASSPORT REQUEST.

REVISED: 6-26-2025 (EL)



(APPLICANT NAME)

VIP PASSPORT SERVICES, INC.

2012 Louisiana Street Houston, Texas 77002 713-659-8472



EXAMPLE

REQUEST FOR SECOND LIMITED PASSPORT

(INDIVIDUAL LETTER)

DATE:
DEAR PASSPORT REPRESENTATIVE,
I, (APPLICANT'S NAME), AM EMPLOYED BY (COMPANY NAME) AS A/AN (POSITION). MY
POSITION REQUIRES THAT I TRAVEL FREQUENTLY ON INTERNATIONAL TRIPS AND USUALLY ON
SHORT NOTICE.
I AM REQUESTING THAT I BE ISSUED A SECOND LIMITED PASSPORT TO ENABLE MY COMPANY
TO SUBMIT THE LIMITED PASSPORT INTO THE (DESTINATION OF THE 2 nd TRIP) EMBASSY, WHO
HAS ADVISED THAT THE PROCESSING TIME TO HAVE THE VISA ISSUED COULD TAKE AS LONG
AS ONE (1) MONTH, WHICH WOULD THEN ALLOW ME TO USE MY CURRENT PASSPORT TO
TRAVEL TO (<u>DESTINATION OF 1st TRIP</u>) ON (<u>DATE</u>).
SHOULD EITHER PASSPORT BE LOST OR STOLEN, I WILL REPORT IMMEDIATELY THE
CIRCUMSTANCES OF THE LOSS TO PASSPORT SERVICES, OR IF ABROAD, TO THE NEAREST U.S.
EMBASSY OR CONSULATE. YOUR ASSISTANCE IN THIS MATTER IS VERY MUCH APPRECIATED.
VERY TRULY YOURS,
Applicant Signs Here



2012 Louisiana Street Houston, Texas 77002 713-659-8472

Website: www.vippassports.com Email: info@vippassports.com



EXAMPLE

REQUEST FOR SECOND LIMITED PASSPORT

(COMPANY LETTER)

DATE:
DEAR PASSPORT REPRESENTATIVE,
(APPLICANT'S NAME), IS EMPLOYED BY (COMPANY NAME) AS A/AN (POSITION). THEIR
POSITION REQUIRES THAT THEY TRAVEL FREQUENTLY ON INTERNATIONAL TRIPS AND USUALLY
ON SHORT NOTICE.
WE ARE REQUESTING THAT (HE/SHE) BE ISSUED A SECOND LIMITED PASSPORT TO ENABLE US
TO SUBMIT THE LIMITED PASSPORT INTO THE (DESTINATION OF THE 2 nd TRIP) EMBASSY, WHO
HAS ADVISED THAT THE PROCESSING TIME TO HAVE THE VISA ISSUED COULD TAKE AS LONG
AS ONE (1) MONTH, WHICH WOULD THEN ALLOW (HIM/HER) TO USE THEIR 2ND LIMITED
PASSPORT FOR TRAVEL TO (DESTINATION OF TRIP THAT THE 2 ND PPT WILL BE USED FOR) ON
(DATE) AND THEN ALLOW THEM TO UTILIZE THE PRIMARY PASSPORT TO TRAVEL TO
(<u>DESTINATION OF 1st TRIP</u>)ON (<u>DATE</u>).
SHOULD EITHER PASSPORT BE LOST OR STOLEN, (HE/SHE) WILL REPORT IMMEDIATELY THE
CIRCUMSTANCES OF THE LOSS TO PASSPORT SERVICES, OR IF ABROAD, TO THE NEAREST U.S.
EMBASSY OR CONSULATE. YOUR ASSISTANCE IN THIS MATTER IS VERY MUCH APPRECIATED.
VERY TRULY YOURS,

Sapervisor's Signature

(SUPERVISOR'S NAME)

ATTACHMENT A

TO: U.S. DEPARTMENT OF STATE

United States Passport Agency

I, the undersigned, am the bearer of valid U.S. 1	passport number
	(NUMBER)
issued on However, in view of (DATE)	the restricted entry policies and/or the time
delay in obtaining visas, it is impossible to com	aplete my trip using one passport. Therefore,
I am requesting the issuance of a second valid p	passport to travel to,
	(COUNTRY)
which I understand will be valid for four years.	Should either passport be lost or stolen, I
will immediately report the circumstances of th	e loss to Passport Services, or, if abroad, to the
nearest U.S. Embassy or Consulate.	
	(APPLICANT'S SIGNATURE)
	(TODAY'S DATE

2ND Valid Passport Request Statement

Please complete and sign the statement below regarding your request for a second regular passport.

In view of the restrictive entry policies of one of the countries I will be visiting, prolonged processing delays required to obtain a visa, or the need for multiple visas for my current travel, I am unable to complete my trip utilizing my current regular passport.

Consequently, I am requesting the issuance of a second regular passport to facilitate my travel to the countries listed on my passport application. I understand that the second passport will be valid for a period of four years and that I may reapply for a new passport at the end of that period if the need continues.

Should either of my regular passports be lost or stolen, I will report the circumstances immediately to the Passport Office or the nearest U.S. Embassy or Consulate.

Countries to be	visited with appr	oximate dates	of travel:	
1. —				
2. ———				
3. ———				
NAME (Please p	orint legibly):			
SIGNATURE:				
DATE:				



United States Department of State
Houston Passport Agency
1919 Smith Street
Suite 1100
Houston, Texas 77002-8049

PLEASE COMPLETE THE FOLLOWING INFORMATION IN ORDER TO COMPLY WITH YOUR REQUEST FOR A SECOND PASSPORT. ALSO SUBMIT EITHER AN ITINERARY FROM A TRAVEL AGENCY OR COMPANY LETTER SPECIFYING COUNTRIES TO BE VISITED.

REQUEST FOR SECOND PASSPORT

I,, AN	4 HOLDER OF PASSPORT
#, ISSUED ON	AT THE
PASSPORT AGENCY. MY CURRENT PAS	SSPORT CONTAINS A
VISA/ENTRY/EXIT STAMP(S) FROM _	I AM
SCHEDULED TO TRAVEL TO	ON
DUE TO THE CURRENT CONDITIONS NO	OW EXISTING BETWEEN THESE
COUNTRIES, I WILL NOT BE ALLOWED	D TO ENTER
WITH MY CURRENT PASSPORT. THERE	EFORE, I REQUEST THE ISSUANCE
OF A SECOND PASSPORT.	
I UNDERSTAND THIS PASSPORT WILL	BE LIMITED IN VALIDITY NOT TO
EXCEED TWO YEARS AND WILL NOT ST	TATE A GEOGRAPHIC LOCATION.
I ALSO WILL REPORT IMMEDIATELY	THE LOST/THEFT/MUTILATION OF
EITHER PASSPORT TO THE NEAREST	PASSPORT AGENCY OR AMERICAN
CONSULATE.	
	SIGNATURE
	DATE

HN-5



parentis must sign)

VIP PASSPORT SERVICES, INC.

2012 Louisiana Street Houston, Texas 77002 713-659-8472





LETTER OF AUTHORIZATION

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

An individual's personal information <u>cannot</u> be released by the U.S. government to another party without the written consent of the individual under the provisions of the Privacy Act of 1974 (5 USC 552a). As a result, an employee at the U.S. passport agency cannot discuss the details of your passport application with a third party without your written consent.

williai	mind 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 pickup 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 passport office to contact me directly should an issue arise with my passport application that concerns matters other than the date on which the passport will be ready for pick-up from the passport agency.		
	Applicant Information		
`	All of the information below may ONLY be filled out by the applicant, parent, legal guardian, or legally acting in loco paretnis)		
Applica	ant Name:		
	(Last Name, First Name, Middle Name)		
Applica	ant Phone No: Date: (Area Code – XXX-XXXX) (MM/DD/YYYY)		
	(Area Code – XXX-XXXX) (MM/DD/YYYY)		
Courie	r Company Name:		
Applica	ant signature:		
(If the a	applicant is under the age of 16, the parent(s), legal guardian(s), or person legally acting in loco		

EXECUTIVE PASSPORT & VISA SERVICE **30118 DAVIS STREET** SUITE "A" **MAGNOLIA, TEXAS 77355** 713-659-0009

Letter of Authorization

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	of your passport application with a third party without your written consent.
Please ch	eck 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 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 passport agency to contact me directly should an issue arise with my passport application that concerns matters 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)
Applica	nt Name:(Last Name, First Name, Middle Name)
Applica	nt Phone No: Date: (Area Code-XXX-XXXX)
Courier	Company Name:
	nt Signature: applicant is under the age of 16 the parent(s),legal guardian(s), or person legally acting

(If in loco parentis must sign)



30102 Scotty Street Magnolia, TX 77355 (210) 402-0813 (832) 200-2944 – Fax

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 provisions of the Privacy Act of deta

Applicant Signature: __

	4 (5 USC 552a). As a result, an employee at a of your passport application with a third par		
Please cl	heck all that apply:		
	I authorize the company stated below to su passport agency and pick up the passport fr	, , , , , , , , , , , , , , , , , , , ,	
	I authorize the passport agency to disclose for further documentation and/or informat my passport application, and I authorize the under my direction.	ion that that may arise in connection with	
	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 passport agency to contact me directly should an issue arise with my passport application that concerns matters other than the date on which the passport will be ready for pick-up from the passport agency.		
	Applicant Info	rmation	
(Note:	: All of the information below may ONLY legal guardian, or person legally	• • • • • • • • • • • • • • • • • • • •	
Applica	ant Name:(Last Name, First Name, Middle	Name)	
Applica	ant Phone No:(Area Code-XXX-XXXX)	Date:(MM/DD/YYYY)	
Courie	r Company Name:		

(If the applicant is under the age of 16 the parent(s), legal guardian(s), or person legally acting in loco parentis must sign)

2010 Louisiana Street Houston, Texas 77002 713-659-3686 1-866-849-8472 Fax 832-200-2944 Website: www.passportphotostogo.com Email: info@passportphotostogo.com

Letter of Authorization

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parentis must sign)

Please	check all that apply:						
	☐ I authorize the company stated below to submit my passport application to a passport agpick 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 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 passport agency to contact me directly should an issue arise with my passport application that concerns matters other than the date on which the passport will be ready for pick-up from the passport agency.						
	Applicant Inform	ation_					
	Note: All of the information below may ONLY be f guardian, or person legally acti	ng in loco parentis)					
Applic	ant Name:						
	(Last Name, First Name, Middle Name)						
Applicant Phone No:		Date:					
**	(Area Code-XXX-XXXX)	(MM/DD/YYYY)					
Courie	er Company Name:						
Applic	ant Signature:						
(If the	applicant is under the age of 16 the parent(s),legal gu	ardian(s), or person legally acting in loco					



Just Passports

600 West 9th Street, Suite B Austin, TX 78701 512-263-7578 or 877-771-RUSH (7874) www.justpassports.com

LETTER OF AUTHORIZATION

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раввро	it application v	vion a unita party without you	ii wiitteii consen				
Please	check all that a	apply:					
☐ I authorize the company stated below to submit my passport applic and pick up the passport from a U.S. passport agency on my behalf			t agency				
	I authorize the passport agency to disclose to the company listed below any requests for further documentation and/or information that 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 passport agency to contact me directly should an issue arise with my passport application that concerns matters other than the date on which the passport will be ready for pick-up from the passport agency. Applicant Information						
(Note		ormation below may ONL guardian, or person legall		= = : =	t, legal		
Applica	ant Name:						
		st Name, First Name, Middle	Name)				
Applicant Phone No:			Date:				
		(Area Code-XXX-XXXX)		(MM/DD/YYYY)			
Courie	r Company Nar	me:					
(If the	ant Signature: applicant is und is must sign)	der the age of 16 the parent(s			— g in loce		