

Grid for Recovery Reference

# Recovered Passport Notification



This form is only for use by law enforcement agencies to report details of passports that have been recovered in circumstances where identity fraud or related crime is known to have taken place. It must be completed in **CAPITAL LETTERS** and **BLACK INK**. Please ensure that you only write within the white boxed areas and do not mark or strike through any other areas of the form. **Where possible, please return the passport with this form.**

Fields marked with a \* are mandatory

## 01

### Details of Recovered Passport

Has the passport been included with this form? \* Yes  No

If not, why not?

Grid for 'If not, why not?' response

Passport Number \*

Grid for Passport Number

Passport Surname \*

Grid for Passport Surname

Passport Forenames \*

Grid for Passport Forenames

Passport Date of Birth \*

Grid for Passport Date of Birth (DDMMYYYY)

Place of Birth \*

Grid for Place of Birth

Date Recovered

Grid for Date Recovered (DDMMYYYY)

Place of Recovery

Grid for Place of Recovery

Country of Recovery

Grid for Country of Recovery

Postcode of Recovery

Grid for Postcode of Recovery

Circumstances of Recovery (where it was found etc)

Grid for Circumstances of Recovery

## 02

### Details of Recovery

## 03

### Police Report

Has the recovery been reported to the police? \* Yes  No  If Yes please fill in the details below

Date Reported to Police

Grid for Date Reported to Police (DDMMYYYY)

Police Station

Grid for Police Station

Police Report Number

Grid for Police Report Number

04

**Recovering Person  
Contact Details  
(if known)**

Title \*  
Surname \*  
Forenames \*  
Address \*  
Address \*  
Address \*  
Country \*  
Postcode \*  
Mobile Telephone Number  
Daytime Telephone Number \*  
Evening Telephone Number  
E-mail Address

**Once you have completed this form please return it and the recovered passport to;  
PO Box 654, Peterborough PE1 1EP.**

**Office Use Only**

**Source Authority** (This is the unique code that represents the authority and how they report, e.g. 'FCOC' for FCO Compass).  
**LSR Submission Post** (The specific post or office within the submitting organisation making the report).  
**Source Authority Source System Reference** (The unique system reference ID for the LS report).  
**Source Contact Details** (The Contact name or telephone number where report is made).

**DATE STAMP**

[Empty box for date stamp]