

Laissez-Passer Application Form

Embassy of the Republic of Liberia Rabat, Morocco

23, Rue Cadi Ben Hamadi Senhaji 10170 Souissi,Rabat, Morocco

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E-mail: info@liberianembassymorocco.ma

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Liberian Citizens Only

Laissez-Passer Fee – 400.00 MAD

Processing Time – 2 Business Days

Express Service Fee – 200.00 MAD

Processing Time - 4 HRS

Bank Details

Embassy of Liberia Consular Fee Account: (011 810 00000321 000 2556422) Express Service Fee must be paid at Consular Office

Laissez-Passer Requirements

Laissez-Passer Application Form: Available at the embassy or can be downloaded online, filled out, scanned and emailed to the Consular Secon-(consular services@liberianembassymo rocco.ma)

- 1. Proof of Identity: National ID card or any other official document.
- 2. Recent Passport-Size Photo: Full face on a white background.
- 3. Declaration of Loss or Theft: If applicable.
- 4. Proof of Travel: Ticket or proof of travel necessity.

NAME (Fi	rst/Midd	lle/Last)						
Date of Birth		Plac	e of Bir	th City/Cou	ntry			
Gender			Previous Na	me(s), I	f Any			
Current Address City/Country			,				Phone #	
How Did You Obtain Liberian Citizenshi		Citizenship? ((Check)	Check) Birth ()		Naturalized ()		
Father's I	Name			C	Country of C)rigin		Living () Dead ()
	·			·		·		
Mother's	Name			C	ountry of C	rigin		Living () Dead ()
Proof of (Citizensh	ip Birth (Certificate()	С	ourt Affida	/it()	Natio	onal ID()

Have You Obtained A L	iberian	Passport			Date of			
Passport? Yes() No()		Number			Issuance			
Date of Travel to Liberia (MM/DD/YY)								
	-		•					
I declare under penalty of perjury, that the information furnished in this application is true, and that the photograph here supplied is a recent picture of the applicant.								
signature of Applicant / date of application//								
OR Name of person filling this from								
Signature of person filling this from / date/								
For OFFICIAL USE ONLY								
Laissez-Passer Number								
Date Issued	Expir			Expiratio	n Date			
Payment Receipt Number Date of Payment								
Payment Receipt Numb	ber			I	Date of Payr	ment		
,					,			
Payment Receipt Numb		d:			,			
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