
GRENADASTATUTORY RULES AND ORDERS NO. 15 OF 2018

THE MINISTER IN EXERCISE OF THE POWERS CONFERRED ON HIM BY SECTION 9 OF THE PASSPORTS ACT CAP. 226 HEREBY MAKES THE FOLLOWING REGULATIONS—

(Gazetted 29th June, 2018).

1. Citation. These Regulations may be cited as the—

PASSPORTS REGULATIONS, 2018.

2. Commencement. These Regulations shall come into force on the 16th day of July, 2018.

3. Application for passport.—(1) A person who is a citizen Grenada may make an application for a passport in the form set out as Schedule I, accompanied by evidence that he or she is a citizen and a receipt for payment of the fee as prescribed in Schedule V.

(2) The holder of a Caribbean Community Grenada Passport that is due to expire may, not more than six months before the date of expiry, make an application for a new passport in the form set out as Schedule I and accompanied by a receipt for payment of the fee as prescribed in Schedule V.

4. Replacement of valid passport.—(1) The holder of a valid Caribbean Community Grenada Passport that has been lost or stolen, or is damaged so as to be unusable, may make an application for a new passport in the form set out as Schedule I, accompanied by evidence of the loss, theft or damage in the form set out as Schedule III and a receipt for payment of the fee as prescribed in Schedule V.

(2) Where the holder of a valid Caribbean Community Grenada Passport wishes to change his or her name, or his or her portrait, from that contained in the passport, he or she may make an application for a new passport in the form set out as Schedule I, accompanied by evidence of a change of name or change of appearance, as the case may be, and a receipt for payment of the fee as prescribed in the Schedule V.

5. Emergency passport. Any person who requires a travel document in an emergency, and has no alternative valid travel document available, may apply for a travel document valid for a single exit from and entry into Grenada, in the form set out as Schedule II, accompanied by evidence of his or her citizenship or permanent residence in any State and a receipt for payment of the fee as prescribed in Schedule V.

6. Expedited passport services.—(1) A person who requires a Caribbean Community Grenada Passport to be issued within 48 hours may, in addition to applying in accordance with regulation 3 or 4, apply to the Chief Passport Officer for express service, accompanied by a receipt for payment of the fee for urgent service as prescribed in Schedule V.

(2) A person who requires a Caribbean Community Grenada Passport to be issued within 24 hours may, in addition to applying in accordance with regulation 3 or 4, apply to the Chief Passport Officer for urgent service, accompanied by a receipt for payment of the fee for urgent service as prescribed in Schedule V.

7. Seafarer's Certificate Nationality and Identity. A person who is a citizen of Grenada may make an application for a Seafarer's Certificate Nationality and Identity in the form set out as Schedule IV, accompanied by evidence that he or she is a citizen and a receipt for payment of the fee as prescribed in Schedule V.

8. Fees payable to the Consolidated Fund. The fees specified in Schedule VI are payable to the Consolidated Fund for the services respectively specified in Schedule V.

9. Applications for minors and persons with incapacity.—(1) In the case of a person under the age of sixteen years old, an application under these Regulations shall be made on behalf of the person by or with the consent of the legal guardian.

(2) In the case of a person who is at least sixteen years old but is unable to make an application by reason of mental incapacity, an application under these Regulations shall be made by the legal guardian on behalf of the person.

(3) In the case of a person who is at least sixteen years old but is unable to make an application by reason of physical incapacity, an application under these Regulations may be made by the next of kin on the behalf of the person.

(4) For the purposes of this regulation—

“legal guardian” means—

(a) a parent; or

(b) an individual who has legal custody or guardianship of the person;

“next of kin” includes a spouse, parent, child, sibling or other individual empowered by a Power of Attorney.

10. Repeal. The Passports (Fees) Regulations, Chapter 226 is hereby repealed.

11. Transitional provision.—(1) A Caribbean Community Grenada Passport issued under the Passports (Fees) Regulations, Chapter 226 prior to 16th July, 2018 shall continue to be valid pursuant to the provisions of these Regulations until the date of expiry of the passport, unless cancelled or withdrawn in accordance with section 3 of the Passports Act, Chapter 226.

(2) Notwithstanding regulation 3 (2), the holder of a Caribbean Community Grenada Passport issued under the Passports (Fees) Regulations, Chapter 226 and due to expire prior to 16th July, 2023 may make an application for a new passport in the same manner as had the passport already expired or been due to expire within six months.

(3) A West Indian Travel Permit issued under the Passports (Fees) Regulations, Chapter 226 prior to 16th July, 2018 shall continue to be valid until the date of expiry of the permit, unless cancelled or withdrawn in accordance with section 4 of the Passports Act, Chapter 226.

SCHEDULE I

PART A

**INSTRUCTIONS FOR COMPLETION OF CARIBBEAN COMMUNITY
GRENADA PASSPORT APPLICATION FORM**

(regulations 3 and 4)

General Instructions

- All relevant sections must be completed.
- Answers should be clearly written in CAPITAL LETTERS.
- Where an applicant is outside of the State of Grenada, he or she may submit an application at the nearest Embassy, Consulate or Mission office.

Signing the Form

- The passport holder must sign the form in the space provided above Section 1 and in section 10. If the passport holder is unable to sign, the space must remain blank.
- In the case of a passport holder under 16 years old, the legal guardian of the passport holder must sign section 10.

Passport Holder under 16 years old or with incapacity

- An application for a passport holder under 16 years old must be made by or with the written consent of the legal guardian of the passport holder i.e. the parent or the individual who has legal custody and proof of legal custody is required.
- Where a passport holder is at least 16 years old but is unable to complete the form as a result of mental incapacity, the application must be made by or with the consent of the legal guardian of the passport holder i.e. the parent or

the individual who has legal guardianship and proof of legal guardianship is required.

- Where a passport holder is at least 16 years old but is unable to complete the form as a result of physical incapacity, the application may be made by the next of kin i.e. the spouse, parent, child, sibling or other individual empowered by a Power of Attorney.

Recommender

Section 11 should be completed by the recommender.

- The recommender should be a Citizen of Grenada who is personally acquainted with the passport holder, and is a Member of Parliament, Justice of the Peace, Minister of Religion, Medical or Legal Practitioner, Established Civil Servant, Principal and other qualified Teachers, Bank Official, Police Officer from the rank of Sergeant, or any person of similar standing.
- A recommender who is not a Citizen of Grenada is acceptable only if he or she is a Legal Practitioner.
- In case of a passport holder under 16 years or a person with mental incapacity, the recommender should be personally acquainted with the legal guardian of the passport holder for at least 2 years.
- A member of the passport holder's immediate family is unacceptable as a recommender.

Documents to be Produced

- Every passport holder must produce his or her *birth certificate*.
- Where the passport holder was not born in Grenada, he or she must produce the document establishing that he or she is a citizen of Grenada (e.g. the *birth certificate of the passport holder's parent* who was born in Grenada, a *certificate of naturalization, registration or investment* issued by Grenada to the passport holder or his or her parent).

- Where the passport holder is married, he or she must produce the *marriage certificate* and, if applicable, the *divorce certificate* or *death certificate of the spouse*.
- Where the passport holder is an adopted child, he or she must produce the *adoption certificate*.
- Where the passport holder has changed his or her name (other than by marriage), he or she must produce the document giving effect to the change (e.g. a *deed poll*) and his or her birth certificate should reflect the change to his or her name.
- Where a passport holder's previous passport has been lost, stolen or damaged, he or she must submit with the application a *police report* or *Statutory Declaration* outlining the circumstances. Additionally, the passport holder must re-submit all relevant documents.
- All documents (other than photographs and a previous passport) must be submitted in original, along with a photocopy.
- A passport holder who surrenders with the application a *previous Caribbean Community Grenada passport* is not required to produce any other document other than the photographs, unless the passport holder's name or status was changed subsequent to the issue of the previous passport.

Photographs

- Every passport holder must either produce *two (2) photographs* of his or her portrait taken within *six (6) months* of the application or submit to live capture of his or her portrait.
- Where the passport holder elects to produce photographs:
 - Photographs must be not *more than 2½in x 2in or less than 2in x 1½in*.
 - The portrait must be with full face from bottom of chin to top of forehead clearly visible with full facial features, and without headdress unless in keeping with religious customs.

- Photographs must be printed on normal thin photographic paper and must not be glazed on the reverse side.
- The recommender is required to endorse the reverse side of one copy of the photographs with the words: *“I certify that this is a true likeness of the passport holder “Mr./Mrs./Miss.....”* and add his or her signature.

PART B



(regulations 3 and 4)

CARIBBEAN COMMUNITY GRENADA PASSPORT APPLICATION FORM

Signature of Passport Holder in the middle of the space provided.

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X

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(Leave this space blank if applying for a passport for a person unable to sign.)

1 PERSONAL DATA			
TITLE: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Other (specify:.....)		MARITAL STATUS: <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Re-married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	
LAST NAME (Family Name):		FIRST, SECOND, THIRD NAME(S):	
MAIDEN NAME (if Married Female):		ORIGINAL NAME (if name change other than by marriage):	
Date of Birth (dd/mm/yy):/...../.....	Place of Birth:	Age Last Birthday:	Nationality:

Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Height: _____ ft. ins.	Colour of Eyes:	Colour of Hair:	Special Peculiarities (Visible):
Country of Residence:	Present Address:	Permanent Address:	Telephone:	
Occupation:			Fax:	
			E-mail:	
2 IF MARRIED, DIVORCE, SEPARATED OR WIDOWED, INFORMATION ON SPOUSE OR FORMER SPOUSE				
LAST NAME (Family Name):		FIRST, SECOND, THIRD NAME(S):		
MAIDEN NAME (if Female):		Country of Birth:	Nationality:	
Date of Marriage (dd/mm/yy):/...../.....		Place of Marriage:	Occupation:	
Permanent Address:		Mailing Address:	Telephone:	
			Fax:	
			Email:	
State whether married more than once (If more than once, particulars of previous marriage or marriages should be given in section 9 on page 3.)				
3 PARTICULARS OF PARENTS				
FATHER				
Last Name:		First and Second Name(s):		
Date of Birth (dd/mm/yy):		Place of Birth:	Profession:	
MOTHER				
Last Name:		First and Second Name(s):		
Date of Birth (dd/mm/yy):		Place of Birth:	Profession:	
MARRIAGE				
Date of Marriage (dd/mm/yy):		Place of Marriage:	Country of Marriage:	

4	CITIZENSHIP OF PASSPORT HOLDER			
Citizen of Grenada by:				
<input type="checkbox"/> Birth		<input type="checkbox"/> Naturalization		<input type="checkbox"/> Investment
<input type="checkbox"/> Descent		<input type="checkbox"/> Registration		
<i>If a citizen of Grenada by birth, attach birth certificate of passport holder.</i>				
<i>If a citizen of Grenada by descent, attach birth certificate of parent(s), or give particulars of certificate of naturalization, registration or investment and attach a certified copy thereof.</i>				
Type of Certificate:		Certificate No.	Date of Issue (dd/mm/yy):	Place of Issue:
<i>If a citizen of Grenada by naturalization, registration or investment, give particulars of certificate naturalization, registration or investment and attach a certified copy of same.</i>				
Type of Document:		Document No.	Date of Issue (dd/mm/yy):	Place of Issue:
5	PASSPORT REQUIRED FOR TRAVELLING TO:			
PURPOSE OF TRAVEL:				
6	IF PREVIOUS PASSPORT LOST, STOLEN OR DAMAGED			
Passport No:		Full name at issue:	Place of Issue:	Date of Issue (dd/mm/yy):
Place of loss:		Date of loss (dd/mm/yy):	Has loss been reported to the Police? (If yes, attach copy of police report)	
How did loss occur?				
What measures were taken at time to report loss and to obtain recovery?				
7	CONTACT IN CASE OF EMERGENCY			
Full Name:		Address:	Telephone:	
Relationship:			Fax:	
			Email:	
8	IF MINOR OR PERSON WITH MENTAL INCAPACITY, LEGAL GUARDIAN'S CONSENT			
I (name of legal guardian)..... the (relationship) of (name of passport holder) hereby give my consent for him or her to hold a passport.				
Signature				
(Where legal guardian unable to sign the form, a consent letter may be submitted with the form.)				

9	SUPPLEMENTARY INFORMATION
10	DECLARATION OF APPLICANT <input type="checkbox"/> I declare that the information given in the application is correct to the best of my knowledge and belief, and <input type="checkbox"/> That the passport holder has not lost the status of citizen of Grenada, and <i>Choose one of the following</i> <input type="checkbox"/> That the passport holder has not held or applied for any passport whatsoever. <input type="checkbox"/> That all previous Grenadian passports granted to me have been surrendered other than passport or travel document number which is now attached and that I have made no other application for a passport since the passport or travel document was issued to me. <input type="checkbox"/> That the passport holder has lost the previous passport. I certify that I have read and understood all the questions set forth in this application and the answers that I have furnished on this form are true and correct to the best of my knowledge and belief. I understand that any false, incomplete or misleading information may result in delays in the issuance of a passport and can lead to having criminal proceedings taken against me. I understand that a passport is the property of the Government of Grenada and can be recalled at any time. Signature: Date: Relationship of applicant to passport holder:
11	DECLARATION OF RECOMMENDER I (name in capitals) a citizen of Grenada/an attorney-at-law declare that to the best of my knowledge and belief that declaration with respect to and the description of Mr./Mrs./Miss. are true and that I can from my personal knowledge of him/her vouch for him/her as a fit and proper person to receive a passport. I have known the passport holder [or in the case of a person under 16 years or with a mental incapacity I have known the applicant Mr./Mrs./Miss.] for years. This day of 20..... Signature: Profession: Address: Telephone No: E-mail:

FOR OFFICIAL USE ONLY				
DOCUMENTS PRODUCED TO BE NOTED:				
Passport Holder's Birth Certificate	Previous Passport	Parent(s) Birth Certificate	Marriage Certificate	Affidavit
Divorcee Certificate	Certificate of Registration, Naturalization or Investment	Letter of Consent	Deed Poll	Photos
OTHER DOCUMENTS				
PLACE WHERE APPLICATION WAS RECEIVED:				
St. George's, Grenville, Carriacou, Gouyave, New York, Washington, London, Canada, Venezuela, Trinidad, Other (specify)				
Receipt No. Received by Date Checked & Approved by Date Supervised by Date Passport No. Date Issued Date Expired Authority Signature			<u>Amount of Fees Paid</u> Passport: Express Service: Urgent Service: Total:	
DISTRIBUTION				
Delivered to Date				
Delivered by Date				

SCHEDULE II

PART A

**INSTRUCTIONS FOR COMPLETION OF EMERGENCY PASSPORT
APPLICATION FORM**

(regulation 5)

General Instructions

- All relevant sections must be completed.
- Answers should be clearly written in CAPITAL LETTERS.

Signing the Form

- The passport holder must sign the form in the space provided above Section 1 and in section 8. If the passport holder is unable to sign, the space must remain blank.
- In the case of a passport holder under 16 years old, the legal guardian of the passport holder must sign section 8.

Passport Holder under 16 years old or with incapacity

- An application for a passport holder under 16 years old must be made by or with the written consent of the legal guardian of the passport holder i.e. the parent or the individual who has legal custody and proof of legal custody is required.
- Where a passport holder is at least 16 years old but is unable to complete the form as a result of mental incapacity, the application must be made by or with the consent of the legal guardian of the passport holder i.e. the parent or the individual who has legal guardianship and proof of legal guardianship is required.
- Where a passport holder is at least 16 years old but is unable to complete the form as a result of physical incapacity, the application may be made by the next of kin i.e. the spouse, parent, child, sibling or other individual empowered by a Power of Attorney.

Recommender

- Section 9 should be completed by the recommender.
- The recommender should be a Citizen of Grenada who is personally acquainted with the passport holder, and is a Member of Parliament, Justice of the Peace, Minister of Religion, Medical or Legal Practitioner, Established Civil Servant, Principal and other qualified Teachers, Bank Official, Police Officer from the rank of Sergeant, or any person of similar standing.
- A recommender who is not a Citizen of Grenada is acceptable only if he or she is a Legal Practitioner.
- In case of a passport holder under 16 years or a person with mental incapacity, the recommender should be personally acquainted with the legal guardian of the passport holder for at least 2 years.
- A member of the passport holder's immediate family is unacceptable as a recommender.

Documents to be Produced

- Valid photograph identification from the passport holder's country of citizenship or residence.

Photographs

- Every passport holder must either produce *two (2) photographs* of his or her portrait taken within *six (6) months* of the application or submit to live capture of his or her portrait.
- Where the passport holder elects to produce photographs:
 - Photographs must be not *more than 2½in x 2in or less than 2in x 1½in*.
 - The portrait must be with full face from bottom of chin to top of forehead clearly visible with full facial features, and without headdress unless in keeping with religious customs.
 - Photographs must be printed on normal thin photographic paper and must not be glazed on the reverse side.

1	PERSONAL DATA				
	TITLE:			MARITAL STATUS:	
	<input type="checkbox"/> Mr.			<input type="checkbox"/> Single	<input type="checkbox"/> Widowed
	<input type="checkbox"/> Mrs.			<input type="checkbox"/> Married	<input type="checkbox"/> Re-married
	<input type="checkbox"/> Miss			<input type="checkbox"/> Divorced	<input type="checkbox"/> Separated
	<input type="checkbox"/> Other (specify:.....)				
	LAST NAME (Family Name):			FIRST, SECOND, THIRD NAME(S):	
	MAIDEN NAME (if Married Female):			ORIGINAL NAME (if name change other than by marriage):	
Date of Birth (dd/mm/yy):/...../.....		Place of Birth:	Age Last Birthday:	Nationality:	
Sex:		Height:	Colour of Eyes:	Colour of Hair:	Special Peculiarities (Visible):
<input type="checkbox"/> Male	 ft. ins.			
<input type="checkbox"/> Female					

	Country of Residence:	Present Address:	Permanent Address:	Telephone:
	Occupation:			Fax:
				E-mail:
2 IF MARRIED, DIVORCE, SEPARATED OR WIDOWED, INFORMATION ON SPOUSE OR FORMER SPOUSE				
LAST NAME (Family Name):		FIRST, SECOND, THIRD NAME(S):		
MAIDEN NAME (if Female):		Country of Birth:	Nationality:	
Date of Marriage (dd/mm/yy):/...../.....		Place of Marriage:	Occupation:	
Permanent Address:		Mailing Address:	Telephone:	
			Fax:	
			Email:	
3 PASSPORT REQUIRED FOR TRAVELLING TO:				
PURPOSE OF TRAVEL:				
4 IF PREVIOUS PASSPORT LOST, STOLEN OR DAMAGED				
Passport No:	Full name at issue:		Place of Issue:	Date of Issue (dd/mm/yy):
Place of loss:	Date of loss (dd/mm/yy):	Has loss been reported to the Police? (If yes, attach copy of police report)		
How did loss occur?				
What measures were taken at time to report loss and to obtain recovery?				
5 CONTACT IN CASE OF EMERGENCY				
Full Name:		Address:	Telephone:	
Relationship:			Fax:	
			Email:	
6 IF MINOR OR PERSON WITH MENTAL INCAPACITY, LEGAL GUARDIAN'S CONSENT				
I (name of legal guardian)..... the (relationship) holder)..... of (name of passport holder)..... hereby give my consent for him or her to hold a passport.				
Signature (Where legal guardian unable to sign the form, a consent letter may be submitted with the form.)				

7	SUPPLEMENTARY INFORMATION	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
8	DECLARATION OF APPLICANT	<p>I declare and certify that I have read and understood all the questions set forth in this application and the answers that I have furnished on this form are true and correct to the best of my knowledge and belief. I understand that any false, incomplete or misleading information may result in delays in the issuance of a passport and can lead to having criminal proceedings taken against me. I understand that a passport is the property of the Government of Grenada and can be recalled at any time.</p> <p>Signature: Date:</p> <p>Relationship of applicant to passport holder:</p>
9	DECLARATION OF RECOMMENDER	<p>I (name in capitals) a citizen of Grenada/an attorney-at-law declare that to the best of my knowledge and belief that the declaration and description of Mr./Mrs./Miss. are true and that I can from my personal knowledge of him/her vouch for him/her as a fit and proper person to receive a passport.</p> <p>I have known the passport holder Mr./Mrs./Miss. for years [and in the case of a person under 16 years or with a mental incapacity I have known the applicant Mr./Mrs./Miss. for years].</p> <p>This day of 20..... Signature:</p> <p>Profession: Address:</p> <p>Telephone No: E-mail:</p>
FOR OFFICIAL USE ONLY		
DOCUMENTS PRODUCED TO BE NOTED:		
<p>PLACE WHERE APPLICATION WAS RECEIVED:</p> <p>St. George's, Grenville, Carriacou, Gouyave, Other (specify)</p>		
<p>Receipt No.</p> <p>Received by Date</p> <p>Checked & Approved by Date</p> <p>Supervised by Date</p> <p>Passport No.</p> <p>Date Issued</p> <p>Date Expired</p> <p>Authority Signature</p>		<p><u>Amount of Fees Paid</u></p> <p>Passport:</p> <p>Express Service:</p> <p>Urgent Service:</p> <p>Total:</p>

DISTRIBUTION

Delivered to Date

Delivered by Date

SCHEDULE III

(regulation 4 (1))

**DECLARATION OF LOST, STOLEN OR DAMAGED PASSPORT**

Surname:.....

Maiden Name (if different from surname):

Other Names:.....

Date of Birth: D...../M...../Y.....

Place of Birth:.....

Marital Status:.....

Address:.....

Country of Residence:.....

Passport Number:.....

Circumstance of loss, theft or damage:.....

.....

.....

.....

.....

I solemnly declare that all this information is true and correct and that I have been told that I may be prosecuted for any false information given herein.

Signature:.....

Date:.....

Officer's Signature:.....

SCHEDULE IV



(regulation 7)

**SEAFARER'S CERTIFICATE OF NATIONALITY AND IDENTITY
APPLICATION FORM**

PERSONAL DATA					
TITLE: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Other (specify:.....)			MARITAL STATUS: <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Re-married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated		
LAST NAME (Family Name):		FIRST, SECOND, THIRD NAME(S):			
MAIDEN NAME (if Married Female):		ORIGINAL NAME (if name change other than by marriage):			
Date of Birth (dd/mm/yy):/...../.....		Place of Birth:	Age Last Birthday:	Nationality:	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Height: ft. ins.	Colour of Eyes:	Colour of Hair:	Special Peculiarities (Visible):	
Race:	Build:	Present Address:	Permanent Address:	Telephone:	
				Fax:	
Country of Residence:				E-mail:	
CITIZENSHIP/PERMANENT RESIDENCE					
Citizen or permanent resident of Grenada by: <input type="checkbox"/> Birth <input type="checkbox"/> Naturalization <input type="checkbox"/> Investment <input type="checkbox"/> Descent <input type="checkbox"/> Registration					

<i>If a citizen of Grenada by descent, attach birth certificate of parent(s), or give particulars of certificate of naturalization, registration or investment and attach a certified copy thereof.</i>			
Last Name:		First and Second Name(s):	
Date of Birth (dd/mm/yy):		Place of Birth:	Profession:
Type of Certificate:	Certificate No.	Date of Issue (dd/mm/yy):	Place of Issue:
<i>If a citizen of Grenada by naturalization, registration or investment or a permanent resident of Grenada, give particulars of certificate or permit of registration, naturalization, investment or permanent residence and attach a certified copy of same.</i>			
Type of Document:	Document No.	Date of Issue (dd/mm/yy):	Place of Issue:
PREVIOUS PASSPORT OR CERTIFICATE			
Particulars of previous passport or certificate:.....			
Seaman Passbook No.:.....			
DECLARATION OF APPLICANT			
I certify that I have read and understood all the questions set forth in this application and the answers that I have furnished on this form are true and correct to the best of my knowledge and belief.			
Signature:		Date:	

FOR OFFICIAL USE ONLY**PLACE WHERE APPLICATION WAS RECEIVED:**

St. George's, Grenville, Carriacou, Gouyave, Other (specify

Receipt No.

Received by Date

Checked & Approved by Date

Supervised by Date

Seafarer's Certificate No.

Date Issued

Date Expired

Authority Signature

DISTRIBUTION

Delivered to Date

Delivered by Date

SCHEDULE V

TABLE OF FEES

(regulation 3, 4, 5, 6, and 7)

PART A

Fees Applicable for Services Provided in the State of Grenada or any other
CARICOM jurisdiction

Item	Fee
1. For the issue of a Caribbean Community Grenada passport under regulation 3 (1), 3 (2) or 4 (2)	E.C.\$175.00 (36 pages)
2. For an endorsement or visa on a foreign passport	E.C.\$100.00 (single entry) E.C.\$250.00 (multiple entries)
3. For the issue of a Caribbean Community Grenada passport under regulation 4 (1)	E.C.\$350.00 (36 pages)
4. For the issue of a travel document under regulation 5	E.C.\$35.00
5. For the issue of a Seafarer's Certificate of Nationality and Identity	E.C.\$60.00
6. For a police certificate of character— (a) for the United States of America (b) for a seafarer (c) in every other case	E.C.\$20.00 E.C.\$20.00 E.C.\$25.00
7. The provision of express service	E.C.\$50.00
8. The provision of urgent service	E.C.\$100.00

PART B

Fees Applicable for Services Provided outside of the State of Grenada or any
other CARICOM jurisdiction

Item	Fee
1. For the issue of a Caribbean Community Grenada passport under regulation 3 (1), 3 (2) or 4 (2)	U.S.\$175.00 or its equivalent (36 pages)
2. For an endorsement or visa on a foreign passport	U.S.\$100.00 or its equivalent (single entry) U.S.\$250.00 or its equivalent (multiple entries)
3. For the issue of a Caribbean Community Grenada passport under regulation 4 (1)	U.S.\$350.00 or its equivalent (36 pages)
4. For the issue of a travel document under regulation 5	U.S.\$35.00 or its equivalent
5. The provision of express passport service under regulation 5 (2)	U.S.\$50.00 or its equivalent

Made by the Minister this 27th day of June , 2018.

KEITH C. MITCHELL

Minister responsible for Home Affairs.

GRENADA

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29/6/2018.