

#### Request for Courtesies of the Port

Date:		
The Permanent Mission of States Mission to the United Nations	presents its compliments and has the honor to request Courtesies of the Port for:	to the United
	(Principal's name and title)	
Mission Contact Person:		
Phone Number:	FAX #:	
Pages (including this cover page): *********************************	*************	
Please return this form to:	United States Mission to the United Nations 140 East 45 <sup>th</sup> Street New York, NY 10017	
	Attention: Thomas J. Buda	

Request should be received no less than 24 hours prior to arrival. If security is being requested or security is traveling with the principal, 72 hours advance notice is required for transmittal to the United States Secret Service or Diplomatic Security Service.

**Telephone (212) 415-4156 Fax (212) 415-4162** 

<u>Please note that in the section pertaining to armed security, we require the signature of the Ambassador or the Charge d'Affaires.</u>

Requests during the normal work week (Mon – Thurs) must be made between the hours of 9:00a.m. and 4:00 p.m.

On Fridays, requests must be received by 3:00 p.m. On weekends, holidays and after hours, emergency requests should be directed to the Protocol Duty Officer through the Department of State Operations Center at (202) 647-1512.

Please make several copies of this form for your use. You may scan this form into your computer, or recreate it, but please do not change its format in any way.

#### U.S. DEPARTMENT OF STATE OFFICE OF THE CHIEF OF PROTOCOL EXPEDITED PORT CLEARANCE REQUEST FORM The Mission of presents its compliments to the Department of State, Office of Protocol, and wishes to refer to the following visit request for: 1. Name\_ (FIRST) (LAST) 2. Title: 3. FIRST Port of Entry into the United States: Commercial Air Carrier Name and Flight #: b. Arrival date: Arrival time: (am or pm) I. For Special (Private) Flights: II. Type of Aircraft (Make/Model): (fill in II-VI) III. Tail #: IV. Call Sign: V. Arrival date: VI. Arrival time: (am or pm) 4. Continuing to Washington, D.C.: (Chiefs of State / Heads of Governments or Foreign Ministers-ONLY) a. Commercial Air Carrier or Private: b. Arrival date: c. Arrival time: (am or pm) 5. Over Flight Clearance Notification for Private Aircraft: Please contact the U.S. Department of State Office of International Security and Peacekeeping Operations for fight clearance into U.S. airports and for over flight relocation requirements. Advance notification of 72 hours is required. (Mr. Scott Paige/Mr. Alf Cooley) Tel. (202) 736-7158, Fax (202) 647-4055) 6. Security and Protection: For Chiefs of State/Heads of Government: Will you request U.S. Government Security Protection from U.S. Secret Service? J TYES NO For Foreign Ministers: Will you request U.S. Government Security Protection from State Department Diplomatic Security Service? TYES NO 7. Greeters: Per U.S. Government regulations, there is a maximum of two (2) greeters allowed in the Government inspection area for all arrivals. a. Name: Title: b. Name: Title: 8. Embassy Travel/Document Coordinator: (For passports, visas, I-94 Forms, Customs and Border Protection Declarations, and baggage stubs): a. Name/Title: b. Tel: c. Fax:

## U.S. DEPARTMENT OF STATE OFFICE OF THE CHIEF OF PROTOCOL EXPEDITED PORT CLEARANCE REQUEST FORM

9. Armed Security: If armed security personnel accompany the dignitary, U.S. Secret Service or Diplomatic Security Service must be notified 72 hours in advance.

PLEASE NOTE: THE AMBASSADOR OR THE CHARGE D'AFFAIRES IS REQUIRED TO SIGN BELOW TO CERTIFY THAT THE ACCOMPANYING SECURITY PERSONNEL ARE TRAINED AND PROFICIENT IN THE USE OF THE WEAPONS THAT THEY CARRY, THAT THEY ARE ABLE TO COMMUNICATE IN ENGLISH, THAT THEY WILL CARRY WEAPONS ONLY WHEN ACCOMPANYING THE DIGNITARY AND THEY WILL SECURELY STORE THEIR WEAPONS WHEN NOT ON DUTY.

SIGNATURE \_\_\_\_\_Date\_

#### AMBASSADOR/CHARGE D'AFFAIRES

Please indicate for each security officer:

		T.		
a. Name:	b. Rank:	c. Service:	d. Passport #:	e. Visa Type:
f. Weapon (Make):	g. Weapon (Model):	h. Weapon (Serial #):	i. Weapon (Caliber):	j. # of Rounds of Ammunition:
a. Name:	b. Rank:	c. Service:	d. Passport #:	e. Visa Type:
f. Weapon (Make):	g. Weapon (Model):	h. Weapon (Serial #):	i. Weapon (Caliber):	j. # of Rounds of Ammunition:
a. Name:	b. Rank:	c. Service:	d. Passport #:	e. Visa Type:
f. Weapon (Make):	g. Weapon (Model):	h. Weapon (Serial #):	i. Weapon (Caliber):	j. # of Rounds of Ammunition:
a. Name:	b. Rank:	c. Service:	d. Passport #:	e. Visa Type:
f. Weapon (Make):	g. Weapon (Model):	h. Weapon (Serial #):	i. Weapon (Caliber):	j. # of Rounds of Ammunition:
a. Name:	b. Rank:	c. Service:	d. Passport #:	e. Visa Type:
f. Weapon (Make):	g. Weapon (Model):	h. Weapon (Serial #):	i. Weapon (Caliber):	j. # of Rounds of Ammunition:
a. Name:	b. Rank:	c. Service:	d. Passport #:	e. Visa Type:
f. Weapon (Make):	g. Weapon (Model):	h. Weapon (Serial #):	i. Weapon (Caliber):	j. # of Rounds of Ammunition:
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### U.S. DEPARTMENT OF STATE OFFICE OF THE CHIEF OF PROTOCOL EXPEDITED PORT CLEARANCE REQUEST FORM

10. Passenger Manifest (REQUIRED FOR ALL REQUESTS): Please provide Name, Title, Date of Birth, Passport ID #, and Visa Type for each of the accompanying members of the delegation to include dignitary and spouse if accompanying. Please include the same information for the flight crew (private aircraft only).

		- International Control of the State of the	(p.trate directly only).	
Name	Title	Date of Birth	Passport ID #	VISA Type
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Name	Title	Date of Birth	Passport ID #	VISA Type

# UNITED STATES OFFICE OF PROTOCOL DEPARTMENT OF STATE EXPEDITED PORT CLEARANCE REOUEST FORM

REQUEST FORM					
	ormation	to help facilitate departure from	of Government or Cabinet Ranko commercial airports. (Note: A faren	ed member ONLY): Please well committee is not permitted beyond the	
1. Name:					
		(FIR	PST) (LAST)		
2. Title:					
3. <u>Departure</u> Port from the United States:					
a. Commercial Air Carrier Name and Flight #:		b. Departure date:	c. Departure time: (am or pm)		
I. For Special (Private) Flights: (Fill in II-VI)  II. Type of Aircraft (Make/Model):					
III. Tail #:	IV. Ca	ıll Sign:	V. Departure date:	VI. Departure time: (am or pm)	

NOTE: The above information is for Department of State Protocol purposes only. The Transportation Security Administration of the Department of Homeland Security will accept requests for airport Departure Screening Courtesies "on-line" via computer e-mail only.

Please refer to the U.S. Mission circular note number HC-08-05, dated February 4, 2005, or visit our website at:

www.usunnewyork.usmission.gov/Isuues/hc.html,

for additional instructions and information. Missions may also call the Host Country Affairs Section of the United States Mission to the United Nations at 212 415-4131 for assistance.