



Australian Government

Department of Foreign Affairs and Trade

DFAT CREDIT CARD DEDUCTION AUTHORITY

CUSTOMER AUTHORITY

Passport Application Form Number:

Applicant Full Name:

DOB (DD/MM/YYYY):/...../.....

Address:

No:

Street Name:

Town/Suburb:

City:

Country:

Contact Phone Number: Mobile:

Email Address:

Lodgement Post:

Passport Type:

Delivery Method:

Adult: ☐

Child: ☐

Senior: ☐

EY: ☐

Post - \$7: ☐

Collect: ☐

Fee(s): Payment Details:

Amount to be debited: \$.....

Please Debit my:

Visa ☐

MasterCard ☐

(Please note that DFAT does not accept Diners Club or American Express credit cards)

Card Number:

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Expiry Date:

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CCV:

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Card Holders Name:.....

Card Holder Signature: Date:

Postal/email address:

Phone number:

DFAT holds all personal information in accordance with our Information Privacy Policy