

# الجمهورية الجزائرية الديمقراطية الشعبية

Consulate General of Algeria  
New York



القنصلية العامة للجزائر  
بنيويورك

## SWORN STATEMENT

I, the undersigned, .....  
(First and last name)

Born on ..... ,  
(M/D/Y)

Phone: ..... Email: .....

acting in my capacity as :

1- Holder of the biometric ID (Application number is.....)

2- Legal tutor of the children hereafter listed:

- ..... - .....  
- ..... - .....  
- ..... - .....  
- ..... - .....  
- ..... - .....

solemnly declare authorizing the Consulate General of Algeria in New York to mail me, exceptionally, the Biometric ID(s) listed above.

I am committed, for this purpose, to:

1. Providing prepaid certified mail return envelope dully bearing my exact current address;
2. Returning the old ID (s);
3. Returning the present sworn statement dully filled in, **signed and notarized**;
4. Receipt printed from the online application;

I remain aware that sending the BiometricID(s) via mail involves risks and peril that include the loss or deterioration of the ID; and acknowledge, therein, that the Consulate General of Algeria in New York will in nowise be liable for any of the aforesaid.

**Notary's Seal**

**Signature of the undersigned**

**P.S:** Non-notarized statement will be systematically rejected.