## **POLICE CLEARANCE**

- Completed Fingerprint form
- Applicant's request (signed letter)
- Passport photo
- Certified copy of Passport
- Certified copy of ID card (for Namibians)
- Proof of payment (Payment to the Embassy Bank account)

Request (signed letter) for a Police Clearance Certificate: stating the name of applicant, date of birth, place of birth, date and length of stay and place where the applicant lived while in Namibia + contact details: telephone number, e-mail address and postal address.

## **PAYMENT**

Fee: 80 SEK + Bank charges + Registered mailing fee

Bank charges: 50 SEK (Foreign payments)

Registered mailing fee: 200 SEK (in case the document is sent to applicant by Registered mail) If the document is sent to applicant in Sweden by Registered mail, total fee to be paid: 280 SEK If the document is sent to applicant abroad by Registered mail, total fee to be paid: 330 SEK

Bank charges are to be paid for foreign payments (Payments made from Bank accounts abroad).

Payment should be made to the Embassy Bank account:

Embassy bankgiro No: 5437-0002 (Domestic payments only)

SEB Swift code: ESSESESS

SEB IBAN No: SE0950 0000 0005 2771 0156 41

SEB Account No: 5277 10 156 41

Name of applicant should be on payment order and indication that payment is for Police Clearance Certificate, Bank charges (Foreign payments) and mailing (in case the document is forwarded to applicant by Registered mail).

Left Hand

Signature of left thumb print of applicant

Right Hand

|                       |               |                         |               | Plain Pri             | nts         |                     |                    |               |      |        |             |
|-----------------------|---------------|-------------------------|---------------|-----------------------|-------------|---------------------|--------------------|---------------|------|--------|-------------|
|                       |               |                         |               | Left thumb            | Right thum  | ıb                  |                    |               |      |        |             |
|                       |               |                         |               |                       |             |                     |                    |               |      |        |             |
|                       |               |                         |               |                       |             |                     |                    |               |      |        |             |
|                       |               |                         |               |                       |             |                     |                    |               |      |        |             |
| P                     |               |                         | FING          | ERPRINT CLA           | SSIFICA     | ATION               |                    |               |      |        |             |
| Surname and ini       | tials         |                         |               |                       |             |                     |                    |               |      |        |             |
| Identity number.      |               |                         |               |                       |             |                     |                    |               |      |        |             |
| Fingerprints take     | en by         |                         |               |                       |             |                     |                    |               | Male | Female | 2           |
| Classification:       |               |                         |               |                       |             |                     | * Mark with an X   | Sex*          | M    | F      | ALCOHOLD BY |
| When a finger is m    | issing, defor | med, or so injured tha  | t the impres  | sion cannot be taken, | this should | be noted in the spa | ce provided for th | at impression | n.   |        |             |
| RIGHT THUMB           |               | RIGHT INDEX             |               | RIGHT MIDDLE          |             | RIGHT RING          | I                  | UGHT SMA      | LL   |        |             |
|                       |               |                         |               |                       |             | * ;<br>13-          |                    |               |      |        |             |
|                       |               | 7                       |               |                       |             | P                   |                    |               |      |        |             |
|                       |               |                         |               |                       |             |                     |                    |               |      |        |             |
| LEFT THUMB            |               | LEFT INDEX              |               | LEFT MIDDLE           |             | LEFT RING           | I                  | LEFT SMAL     | L    |        |             |
|                       |               | tes,                    |               |                       |             |                     | f                  |               |      |        |             |
|                       |               |                         |               |                       |             |                     |                    |               |      |        |             |
|                       | **            | T T T                   |               | ,                     |             |                     |                    |               |      |        |             |
| I declare that the in | formation fu  | rnished by me herein is | s true and co | orrect                |             |                     |                    |               |      |        |             |