## I-824, Application for Action on an Approved Application or Petition

START HERE - Please type or pri	For US	For USCIS Use Only		
Part 1. Information about yo	Returned	Receipt		
Family Name (Last name)	Given Name (First Name) Middle Name	Date		
Company or Organization Name		Date Resubmitted		
		Resubmitted		
Home or Business Address - Street	Number and Name Apt./Suite #	Date		
		Date		
City	State or Province	Reloc Sent		
Zip/Postal Code	Country	Date		
		Date		
Mailing Address - Street Number ar	nd Name Apt./Suite #	Reloc Rec'd		
		Dete		
C/O (in care of):		Date		
C/O (in cure of).	-	Date		
City	State or Province	Remarks		
City	State of Province			
Zip/Postal Code	Country			
Daytime Phone # (Area/Country Cod	les)			
Country of Birth	Country of Citizenship			
Date of Birth (mm/dd/yyyy)	IRS Tax # (if any)			
		Action Block		
A # (if any)	U.S. Social Security # (if any)			
Part 2. Reason for request (c	heck one):	-		
	,	-		
I am requesting: (Check one box	c.)			
<b>A.</b> A duplicate approval notice.				
	J.S. Consulate or Port-of-Entry about the approval of	an		
application of petition. Pleas	e notify the U.S. Consulate or Port-of-Entry at:	-,		
		To Be C	Completed by	
C. USCIS to notify a U.S. Consulate that my status has been adjusted to permanent resident. Please notify the U.S. Consulate at:		Attorney or R	Attorney or Representative, if any.	
		Fill in box if G-28 is attached to represent the applicant.		
<b>D.</b> USCIS to send my approved	immigrant visa to the National Visa Center (NVC).	ATTY State Lice	ense #	
E. USCIS to notify the U.S. Dep	partment of State of my U.S. citizenship status.			

Part 3. Additional information.					
1. Give the following information about	he original petition of	or application.			
Type of Petition or Application (Form Number)		Receipt Number (	Receipt Number (On Form I-797, Notice of Action)		
Filing Date of Petition or Application (mm/dd/yyyy)		Approval Date (m	Approval Date (mm/dd/yyyy)		
2. Give the following information about	the petitioner or appl	licant for the original petit	tion or application.		
Current/Most Recent Immigration Status		Naturalization/Cit	tizenship Certificate Numbe	r	
3. Give the following information about the following informat	the principal benefici	iary of the original petition	n or application.		
Family Name (Last Name)	Given Name (	First Name)	t Name) Middle Name		
Date of Birth (mm/dd/yyyy)	Country of Bir	A # (if any)			
Home Address - Street Number and N	Vame		A	pt. #	
City State	or Province	Zip/Postal Code	Country		
Mailing Address - (if different from h	nome address				
Street Number and Name/P.O. Box No			C/O (In Care Of)		
City State	or Province	Zip/Postal Code	Country		
Daytime Phone (Area/Country Code a	nd Number)				
Part 4. Signature. Read the informa	ution on penalties in	the instructions before co	mnleting this part		
I certify, under penalty of perjury under with it is all true and correct. I authorize	the laws of the Unite the release of any	information from my rec	at this information and the ords that the U.S. Citizensh	ip and Immigration	
Services needs to determine eligibility for	the benefit sought.	-			
Signature	Dayt	ime Phone Number (with	h area code) Date (mm	/dd/yyyy)	
<b>NOTE:</b> If you do not completely fill out t		-	listed in the instructions, yo	u may not be	
found eligible for the requested benefit an	d this application m	ay be denied.			
Part 5. Signature of person prepare	aring form, if ot	her than above. (Sig	n below.)		
I declare that I prepared this at the reques	st of the applicant and	d it is based on all informa	ation of which I have knowl	edge.	
Signature		Print or Type Your	Name		
Firm Name and Address		J [			
Date (mm/dd/yyyy)	E-Mail Addres	s (if any)	Daytime Phone Numb	er (with area code)	