



# ITALIAN CITIZENSHIP ASSISTANCE PROGRAM

3285 North Arlington Heights Road  
Suite 203

Arlington Heights, Illinois 60004

Toll Free: 888.604.1970 Fax: 847.253.0295

Website: [www.icapbridging2worlds.com](http://www.icapbridging2worlds.com)

Welcome to ICAP, a privately owned company and the only U.S. based program that offers complete services for individuals who are applying for dual citizenship with Italy. We strive to keep current with the application requirements and procedures as mandated by all Italian Consulate Jurisdictions in the United States. Our accreditation and excellent rating with the Better Business Bureau demonstrates that we provide services that you can trust! In this packet, you will find information on how to order the following services:

- **Naturalization Record Search** – Searches of Naturalization Records or Certification of Non-existence of Records of your ancestor are conducted through the following government Agencies: USCIS-Homeland Security, the National Archives and Record Administration (NARA), and State and County Courts Archives
- **Italian Vital Record Procurement** – Our collaborators in Italy work on your Italian Vital Record requests with the Registrars of Civil Records Offices in all parts of Italy. We obtain birth, marriage and death records in the format required by the Italian Consulate for citizenship applications, and birth and marriage registrations if needed to obtain EU passport for newly recognized Italian Citizens.
- **Translation of Required Documents** – Our translations are completed by native speakers of Italian who have graduated from Italian Universities. Our translations have been accepted by all Italian Consulate Jurisdictions in the U.S. Translations of divorce, adoption, and legal name change documents are proof read by our Attorney in Italy to ensure precise use of legal terminology.
- **US Vital Records and Apostille** – Our US Records Specialist obtains certified birth, marriage, divorce and death records as well as authentication of these documents with the Apostille for Italy. Because application fees and Apostille seals vary from State to State, you will be provided with a quote valid for 60 days. Services can be obtained individually or purchased together to receive a 10% discount on your future translation order.

## Instructions:

1. Select the service(s) that you desire and complete the corresponding "Form" for the service(s).
2. Proceed to the Order Form, *which is page 6*, where you will enter your identifying information, calculate the price of your order, and provide the method of payment information.
3. **Mail your order and payment to:**

ICAP  
3285 N. Arlington Heights Road  
Suite 203  
Arlington Heights, IL 60004.

It's that simple! If you have questions on placing your order or would like to arrange ordering via e-mail, please contact us at [icap.orders@icapbridging2worlds.com](mailto:icap.orders@icapbridging2worlds.com).

We look forward to assisting you in your quest for Italian Dual Citizenship!

ICAP TEAM





**NATURALIZATION RECORD SEARCH FORM**

**Our service includes a full search for the Naturalization Records of your ancestor:**

- Full Naturalization Record Search of all US Federal, State, and County Naturalizations conducted at Homeland Security
- Federal Natural Record Search at the US National Archives for Federal Court Naturalizations
- Certified Naturalization Records or Certificate of Nonexistence of Records from USCIS
- Search for US Census Report (1910, 1920, 1930) WWI Military Draft Registration and Ship Arrival

Cost for this service is **\$270.00**

*Certified census reports can be obtained if required by the Consulate of your Jurisdiction at an additional fee*

**CLIENT NAME:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**RELATIONSHIP TO ANCESTOR BEING SEARCHED:** \_\_\_\_\_

**Ancestor Information**

PLEASE **HAND PRINT** AND COMPLETE TO THE BEST OF YOUR KNOWLEDGE

**FULL NAME OF ANCESTOR:** \_\_\_\_\_

**OTHER NAMES USED:** \_\_\_\_\_

**ANCESTOR IS:**     Living                       Deceased\*            If deceased, what year \_\_\_\_\_

\* A copy of the death certificate or obituary is needed if ancestor is less than 100 years old.

**DATE OF BIRTH:** \_\_\_\_\_      **PLACE OF BIRTH:** \_\_\_\_\_

**DATE OF ARRIVAL\* IN THE UNITED STATES (mm/dd/yyyy):** \_\_\_\_\_

\* If arrival date is unknown, please check choices below.

Before 1906 \_\_\_\_\_      1906-1924 \_\_\_\_\_      1925-1940 \_\_\_\_\_      After 1940 \_\_\_\_\_

**SPOUSE'S NAME:** \_\_\_\_\_

**CHILDREN'S NAMES:** \_\_\_\_\_

**PLACE OF ANCESTOR'S DOMICILE IN U.S.** \_\_\_\_\_

Please include city, county, and state.

**YEAR AND PLACE OF NATURALIZATION, if known:** \_\_\_\_\_

**YOUR RELATIONSHIP TO YOUR ANCESTOR:** \_\_\_\_\_

**NAME AND DATE OF BIRTH OF ANCESTOR'S SON/DAUGHTER THROUGH WHOM YOU ARE APPLYING FOR DUAL CITIZENSHIP IF THE ANCESTOR IS YOUR PARENT INDICATE SELF↓**

**NAME:** \_\_\_\_\_ **BIRTH DATE:** \_\_\_\_\_

**Include this page with the Order Form (page 6 of Packet)**



# ITALIAN VITAL RECORDS DETAILS FORM

We procure Birth, Marriage and Death Records from all regions of Italy. Our service includes:

- Preparing your requisition letter for the Italian Civil Records Office
- Procuring the records in the format required by the Italian Consulate for dual citizenship
- Follow up contact to the Italian Civil Records Office as needed to procure your order
- Shipping and postage to and from Italy

The timeline for procuring Italian records is typically 4 to 6 weeks. The cost for each procured document is \$105.00 for records of ancestors and \$125.00 if you are a newly recognized Italian Citizen in need of the registration of your Vital Records in order to obtain your Italian Passport.

**INCLUDE A LEGIBLE PHOTOCOPY OF YOUR STATE ID WITH YOUR ORDER**

**NAME:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

Please **HAND PRINT** the information below for each Italian Vital Record requested.

**1. Ancestral (parent, grandparent, great grandparent, etc.) birth, marriage and death records. Your relationship to the ancestor listed below \_\_\_\_\_**

Ancestor's first and last name (maiden if female) \_\_\_\_\_  
 Type of Record \_\_\_\_\_ Date of Event \_\_\_\_\_  
 Town \_\_\_\_\_ Province if known \_\_\_\_\_

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Ancestor's first and last name (maiden if female) \_\_\_\_\_  
 Type of Record \_\_\_\_\_ Date of Event \_\_\_\_\_  
 Town \_\_\_\_\_ Province if known \_\_\_\_\_

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Ancestor's first and last name (maiden if female) \_\_\_\_\_  
 Type of Record \_\_\_\_\_ Date of Event \_\_\_\_\_  
 Town \_\_\_\_\_ Province if known \_\_\_\_\_

-----

Ancestor's first and last name (maiden if female) \_\_\_\_\_  
 Type of Record \_\_\_\_\_ Date of Event \_\_\_\_\_  
 Town \_\_\_\_\_ Province if known \_\_\_\_\_

**2. Newly recognized Italian Citizen's Vital Record registration (birth and marriage) of:**

Full Name on Vital Record \_\_\_\_\_ Relationship of Person to you \_\_\_\_\_  
 Type of Record \_\_\_\_\_ Date of Event \_\_\_\_\_  
 Place of event in US \_\_\_\_\_ Consulate Location \_\_\_\_\_  
 Town and Province of Registration in Italy \_\_\_\_\_

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First Name on Vital Record \_\_\_\_\_ Relationship of Person to you \_\_\_\_\_  
 Type of Record \_\_\_\_\_ Date of Event \_\_\_\_\_  
 Place of event in U.S. \_\_\_\_\_ Consulate Location \_\_\_\_\_  
 Town and Province of Registration in Italy \_\_\_\_\_

**Total number of Ancestral Records** \_\_\_\_\_ **Total number of Vital Record Registrations** \_\_\_\_\_

**Include this page with the Order Form (page 6 of Packet)**



**TRANSLATION SERVICES FORM**

**AGREEMENT:** I have enclosed *legible copies* of the following "Long From" vital records for translation from English to Italian. I understand that the cost for translating is as follows: Birth and Marriage Certificates, **\$60.00** per page; Death Certificates, **\$75.00** per page; *pricing of Divorce: Judgments / Decrees/Certificates will need to be determined prior to submission please contact [icap.orders@icapbridging2worlds.com](mailto:icap.orders@icapbridging2worlds.com) for your quote.* Prices include the translation service and proof reading; a final hard copy mailed to you along with a Certificate Letter of Professional Translation. Divorce translations are proof read by our attorney.

**SEND LEGIBLE PHOTOCOPIES: DO NOT SEND ORIGINAL DOCUMENTS**

**CLIENT NAME:**  
\_\_\_\_\_

**EMAIL ADDRESS:**  
\_\_\_\_\_

I am applying for dual citizenship with Italy "jure sanguinis" through the following ancestor:

father       mother  
 grandfather➤       paternal       maternal  
 great-grandfather➤  paternal       maternal

**List each document to be translated**

Name on Document	Document Type	Relationship to Applicant
1 _____		
2 _____		
3 _____		
4 _____		
5 _____		
6 _____		
7 _____		
8 _____		
9 _____		
10 _____		
11 _____		
12 _____		

**TOTAL # OF DOCUMENTS \_\_\_\_\_**

**Include this with the Order Form (page 6 of Packet)**



**U.S. CERTIFIED VITAL RECORD QUOTE FORM**

**Please print clearly and fax this page to 1-847-253-0295** Services include requisite letter and application forms, certificate fees, follow-up calls as needed, shipping and handling via certified priority mail. Print additional pages as needed.

**NAME:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Mailing Address (must match Photo ID or Utility Bills):** \_\_\_\_\_

\_\_\_\_\_

|||||

**Birth Certificate Request**

Full Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

City, County/Borough and State of birth: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Hospital: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name (include maiden): \_\_\_\_\_

|||||

**Marriage License/Certificate Request**

Name of Groom: \_\_\_\_\_ Name of Bride: \_\_\_\_\_

Groom's date of birth: \_\_\_\_\_ Bride's date of birth: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_

City, County/Borough and State of Marriage: \_\_\_\_\_

County/Borough in which Marriage License was applied for: \_\_\_\_\_

|||||

**Death Certificate Request**

Deceased Person: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Place of Death City, County/Borough, State: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Name of Hospital or Funeral Home (if known) \_\_\_\_\_

Name of Father: \_\_\_\_\_ Name of Mother: \_\_\_\_\_

|||||

**You will receive a quote within 48 hours Monday-Friday all quotes are valid for 60 days.**



**APOSTILLE QUOTE FORM**

**Apostille Services:** Please print clearly and fax this page to 1-847-253-0295. Service includes preparation of requisite letter for the State Authentication Department, Apostille fee, follow-up calls as needed, shipping and handling via certified priority mail.

**NAME:** \_\_\_\_\_ **Email** \_\_\_\_\_

\*\*\*\*\*

Type of Certificate (birth, marriage, etc.): \_\_\_\_\_

State Of Issuance: \_\_\_\_\_

County of Issuance if issued by County Vital Records: \_\_\_\_\_

\*\*\*\*\*

Type of Certificate (birth, marriage, etc.): \_\_\_\_\_

State Of Issuance: \_\_\_\_\_

County of Issuance if issued by County Vital Records: \_\_\_\_\_

\*\*\*\*\*

Type of Certificate (birth, marriage, etc.): \_\_\_\_\_

State Of Issuance: \_\_\_\_\_

County of Issuance if issued by County Vital Records: \_\_\_\_\_

\*\*\*\*\*

Type of Certificate (birth, marriage, etc.): \_\_\_\_\_

State Of Issuance: \_\_\_\_\_

County of Issuance if issued by County Vital Records: \_\_\_\_\_

\*\*\*\*\*

Type of Certificate (birth, marriage, etc.): \_\_\_\_\_

State Of Issuance: \_\_\_\_\_

County of Issuance if issued by County Vital Records: \_\_\_\_\_

\*\*\*\*\*

Type of Certificate (birth, marriage, etc.): \_\_\_\_\_

State Of Issuance: \_\_\_\_\_

County of Issuance if issued by County Vital Records: \_\_\_\_\_

\*\*\*\*\*

Type of Certificate (birth, marriage, etc.): \_\_\_\_\_

State Of Issuance: \_\_\_\_\_

County of Issuance if issued by County Vital Records: \_\_\_\_\_

\*\*\*\*\*

**You will receive a quote within 48 hours Mon-Fri all quotes are valid for 60 days.**



# CLIENT ORDER FORM

CLIENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/ST/ZIP: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ CONTACT PHONE: \_\_\_\_\_

Have you scheduled a Consulate meeting? If so, Date: \_\_\_\_\_ Location: \_\_\_\_\_

**SERVICES – please check all services ordered and calculate pricing**

**TRANSLATION SERVICES**

Birth/Marriage Records **\$60.00** per page X \_\_\_\_\_ pages = \$ \_\_\_\_\_

Divorce documents – quote provided by ICAP >>>>> = \$ \_\_\_\_\_

Death Records **\$75.00** per page X \_\_\_\_\_ pages = \$ \_\_\_\_\_

→ *Translation Services Details Form must be included*

**ITALIAN VITAL RECORDS**

Ancestral **\$105.00** per document X \_\_\_\_\_ documents = \$ \_\_\_\_\_

New Italian Citizen **\$125.00** per document X \_\_\_\_\_ documents = \$ \_\_\_\_\_

→ *Italian Vital Records Details Form must be included*

**NATURALIZATION RECORD SEARCH**

**\$270.00** per Naturalization Record Search X \_\_\_\_\_ searches = \$ \_\_\_\_\_

→ *Naturalization Record Search Form must be included*

**U.S. VITAL RECORDS**

Quote provided by ICAP\* = \$ \_\_\_\_\_

\*Prior submission of quote form is a prerequisite

→ *Include copy of ICAP quote form*

**APOSTILLE**

Quote provided by ICAP\* = \$ \_\_\_\_\_

\*Prior submission of quote form is a prerequisite

→ *Include copy of ICAP quote form*

Total cost of services ordered from **ICAP:** = \$ \_\_\_\_\_

**PAYMENT – please select payment method and provide information**

Personal Check, check # \_\_\_\_\_ or Money Order # \_\_\_\_\_ Payable to 'ICAP'

Credit Card # (VISA, MC, DISC, AMEX) \_\_\_\_\_ Exp. Date \_\_\_\_\_

Cardholder's address: \_\_\_\_\_

Mail all forms to >

**ICAP**

**3285 N. Arlington Heights Road**

**Suite 203**

**Arlington Heights, IL 60004**