



Malta Residence and Visa Programme

FORM MRVP2

Personal Details



RESIDENCY MALTA
A G E N C Y

Residency Malta Agency, Zentrum Business Centre, Level 2,
Mdina Road, Qormi QRM 9010, Malta

customercare.residencymalta@gov.mt

Please refer to the document list, checklist and guidelines prior to completing this form.

Please use a blue pen to sign this form.



Part A is to be filled by the Main Applicant and any Dependants.

Part C is to be filled only by the Main Applicant and the Benefactor (where applicable).

Part A

A1. Title (Mr / Mrs / Miss / Ms / Other)	A2. If applicable, full legal name in ethnic script										
A3. Full legal surname (exactly as per passport)	A4. Full legal given name(s) (exactly as per passport)										
A5. Full legal first and middle names (as per birth certificate, only if different from A4)	A6. If applicable, explanation for difference in A4 and A5										
A7. Other names including name at birth, maiden names, previous married name(s) and/or aliases											
A7.1 Other surnames											
A7.2 Other first and middle names											
A7.3 Explanation											
A7.4 Date of name change (where applicable)											
A8. Place of birth	A9. Country of birth										
A10. Date of birth	A11. Gender										
<table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 20px;">D</td> <td style="width: 20px;">D</td> <td style="width: 20px;"> </td> <td style="width: 20px;">M</td> <td style="width: 20px;">M</td> <td style="width: 20px;"> </td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Y</td> </tr> </table>	D	D		M	M		Y	Y	Y	Y	<input type="checkbox"/> Male <input type="checkbox"/> Female
D	D		M	M		Y	Y	Y	Y		
A12. Tick as applicable: <input type="checkbox"/> Main Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Benefactor <input type="checkbox"/> Other relationship (please specify)											

A13. Nationality / nationalities currently held													
A14. Previous nationality / nationalities held, lost, renounced or deprived, including dates													
A15. Status (select as appropriate)			List the date(s) and place(s) that this status was registered										
<input type="checkbox"/> A15.1 Never married													
<input type="checkbox"/> A15.2 Married (if married more than once, include details in Part B)			D	D		M	M		Y	Y	Y	Y	
<input type="checkbox"/> A15.3 Divorced			D	D		M	M		Y	Y	Y	Y	
<input type="checkbox"/> A15.4 Legally separated			D	D		M	M		Y	Y	Y	Y	
<input type="checkbox"/> A15.5 Widowed			D	D		M	M		Y	Y	Y	Y	
<input type="checkbox"/> A15.6 Other (please specify)			D	D		M	M		Y	Y	Y	Y	

A16. Other countries where authorised to temporarily or permanently reside (including validity dates if applicable – continue on Part B or on additional pages if necessary quoting Section A17)																						
A16.1 Country	A16.2 Date of issue								A16.3 Date of expiry								A16.4 Actual duration of stay	A16.5 No expiry				
	D	D		M	M		Y	Y	Y	Y	D	D		M	M		Y	Y	Y	Y		<input type="checkbox"/>
	D	D		M	M		Y	Y	Y	Y	D	D		M	M		Y	Y	Y	Y		<input type="checkbox"/>
	D	D		M	M		Y	Y	Y	Y	D	D		M	M		Y	Y	Y	Y		<input type="checkbox"/>
	D	D		M	M		Y	Y	Y	Y	D	D		M	M		Y	Y	Y	Y		<input type="checkbox"/>

A17. Passport details (if a holder of multiple valid passports, all passport details must be provided – continue on Part B or on additional pages if necessary quoting Section A18)		
	A17.1 Passport 1	A17.2 Passport 2
A17.3 Issuing country		
A17.4 Passport number		
A17.5 Place of issue		
A17.6 Date of issue		
A17.7 Date of expiration		
A18a. Identity card number and issuing country (mandatory for countries where applicable)		
A18a.1 ID No.	A18a.2 Country	
A18b. Tax Identification number and issuing country (mandatory for countries where applicable)		
A18b.1 Tax Identification number	A18b.2 Country	
A19. Main residential address in full	A20. Alternative principal residential address in full (if applicable)	
A21. Fixed telephone number	A22. Mobile telephone number	A23. Personal email address

Work and Business Information

TICK IF NOT APPLICABLE

A24. Current primary occupation	A25. Employment status <input type="checkbox"/> Self-Employed <input type="checkbox"/> Employee of a company
A26. Sector and type of business	
A27. Name of business or employer	A28. Entity or employer's company website address
A29. Business or employer address	A30. Business telephone number
	A31. Business email

A32. Details of all residential addresses for the past 10 years (not excluding any period of time)

From (month/year)	To (month/year)	Street address, town, province/state, country, postal code	* Local Police Clearance provided (Y-N-N/A)

*Local Police Clearance is required for EACH country in which you have resided for more than 6 months.

A33. Employment history for the past 5 years (including all periods of unemployment, retirement, self-employment, etc.) TICK IF NOT APPLICABLE

A33.1.1 Occupation				A33.1.2 Name of business or employer				A33.1.3 Position									
A33.1.4 City / town & Country								A33.1.5 Type of business									
A33.1.6 Date from		M	M		Y	Y	Y	Y	A33.1.7 Date to		M	M		Y	Y	Y	Y

A33.2.1 Occupation				A33.2.2 Name of business or employer				A33.2.3 Position									
A33.2.4 City / town & Country								A33.2.5 Type of business									
A33.2.6 Date from		M	M		Y	Y	Y	Y	A33.2.7 Date to		M	M		Y	Y	Y	Y

A33.3.1 Occupation				A33.3.2 Name of business or employer				A34.3.3 Position							
A33.3.4 City / Town & Country						A33.3.5 Type of business									
A33.3.6 Date from	M	M		Y	Y	Y	Y	A33.3.7 Date to	M	M		Y	Y	Y	Y

A33.4.1 Occupation				A33.4.2 Name of business or employer				A33.4.3 Position							
A33.4.4 City / Town & country						A33.4.5 Type of business									
A33.4.6 Date from	M	M		Y	Y	Y	Y	A33.4.7 Date to	M	M		Y	Y	Y	Y

A33.5.1 Occupation				A33.5.2 Name of business or employer				A33.5.3 Position							
A33.5.4 City / Town & Country						A33.5.5 Type of business									
A33.5.6 Date from	M	M		Y	Y	Y	Y	A33.5.7 Date to	M	M		Y	Y	Y	Y

A34. Details of Parent 1 (biological or adoptive)

A34.1 Title (Mr / Mrs / Miss / Ms / Other)				A34.2 If applicable, full legal name in ethnic script									
A34.3 Full legal surname				A34.4 Full legal first / given names									
A34.5 Place of birth (city & country)		A34.6 Citizenship(s)		A34.7 Date of birth									
				D	D		M	M		Y	Y	Y	Y

A35. Details of Parent 2 (biological or adoptive)

A35.1 Title (Mr / Mrs / Miss / Ms / Other)				A35.2 If applicable, full legal name in ethnic script									
A35.3 Full legal surname				A35.4 Full legal first / given names									
A35.5 Place of birth (city & country)		A35.6 Citizenship(s)		A35.7 Date of birth									
				D	D		M	M		Y	Y	Y	Y

Part B – Additional information

Additional information and/or description of attachments

B1. Section number	B2. Details

Part C – Source of Funds and Wealth (to be filled by Main Applicant and Benefactor, where applicable, only)

Bank Account Details

Please specify your personal bank account details from which the balance of funds payable to the Residency Malta Agency will be remitted. If you fail to provide these details and/or if you remit funds to the Residency Malta Agency bank account from an account that is different from that declared here, then funds will be returned and processing of the applications stops.

Bank statements of the below-specified account, covering a minimum of the previous three (3) months, from which funds for the MRVP are being remitted, are required. Statements of bank accounts which have been recently opened, are not active, or which show a zero balance, will not be accepted unless statements, covering a minimum of the previous three (3) months, of the Main Applicant's or Benefactor's feeder account, are provided.

C1. Account in the name of	
C2. Account number	C3. IBAN No. and Bank SWIFT code
C4. Bank name	
C5. Bank address (in full)	

Source of Funds

Guidance - Source of funds is the activity, event, business, occupation or employment from which the funds have been generated, that will be used to fund your Malta Residence and Visa Programme application.

C6. Are you:		
<input type="checkbox"/> Self-Employed	<input type="checkbox"/> Employee of a company	<input type="checkbox"/> Retired
Complete Source of Funds - Section 1	Complete Source of Funds - Section 2	Complete Source of Funds - Section 3

Section 1 - Self-Employed

Guidance - Your annual income is earned conducting operations from a business or trade that you own/control.

Please provide supporting evidence of your declared income

C7. What is your annual income? (in USD, Euros, GBP, RMB, other)													
C8. What is your business/company position?													
C9. Business name													
C10. Country of incorporation/registration					C11. Date of incorporation/registration								
D		D			M		M			Y	Y	Y	Y
C12. Registered office address (in full)					C13. Mailing address (if different from registered address)								
C14. Business telephone number			C15. Business/your email address			C16. Business website address							
C17. Nature of the business													
C18. Geographical sphere(s) of the business activities (e.g. the location of the principal markets in which you do business)													

Section 2 – Employee of a company

Guidance - Your annual income is derived from working for an employer who pays your salary.

Please provide supporting evidence of your declared income

C19. What is your annual income? (in USD, EUR, GBP, RMB, other)	
C20. What is your current occupation?	
C21. Business name of your employer	
C22. Business address of your employer (in full)	
C23. Business telephone number	C24. Your employer's company website address

Section 3 - Retired

Guidance – Retirement income is income earned through retirement saving assets, pensions, stocks, mutual funds, investments, insurance, rental income, etc.

Please provide supporting evidence

C25. What is your annual retirement income? – if applicable (in USD, EUR, GBP, RMB, other)
C26. How is your annual retirement income generated? (savings, investments, involvement in firm/s, consulting, etc.) <i>Please continue on a separate sheet and attach it to this form, if necessary, quoting section C26</i>
C27. What was your annual income prior to retirement? (in USD, EUR, GBP, RMB, other)

Source of Wealth

Guidance - Source of wealth is distinct from source of funds; it is a summary of the activities which have generated your total net worth, i.e. the activities which have generated your funds and property.

C28. What is your estimated total net worth? (in USD, EUR, GBP, RMB, other)

C29. Please provide a detailed statement of how you have accumulated your estimated total net worth stated in C28 by listing the main types of acquisitions/dispositions, and events (such as employments, investments, donations, inheritance, etc., defining the income from each event) that have led to your wealth's accumulation.

Please continue on a separate sheet and attach it to this form, if necessary, quoting section C29

Please provide supporting evidence.

C30. List the geographical sphere(s) of the main activities that have generated your total net worth (e.g. location of real estate holdings)

C31. Financial Figures

Please continue on a separate sheet and attach it to this form, if necessary, quoting section C31

C31.1 Income over the years:

C31.2 Declaration is in the following currency

Note: For each of the entries below please fill in EITHER the annual Income OR the Total Income

C31.3 From	C31.4 To	C31.5 Currency	C31.6 Annual income	C31.7 Total Income	C31.8 Total income in declared currency	C31.9 Comment (for example: name of employer and period of employment)

C31.10 Total declared lifetime income _____

C31.11 Accumulated wealth:

C31.12 Wealth:*	C31.13 Currency	C31.14 Amount	C31.15 Equivalent in declared currency	C31.16 Details & information	C31.17 Docs provided?

C31.18 Total declared wealth in declared currency :	
C31.19 Total evidenced wealth in declared currency:	
C31.20 Total evidenced liquidity in declared currency:	

*Values for wealth should be one of the following:

- 1 Bank deposits (this will be part of liquidity)
- 2 Financial assets (this will be part of liquidity)
- 3 Real estate
- 4 Company capital
- 5 Valuables
- 6 Cars, yachts, etc
- 7 Others

C32. List of ALL shareholdings & directorships: please provide the business licence/s and/or any shareholders' information sheet and/or any Memorandum and Articles of Association for the main company/ies from where your income was/is derived:

Please continue on a separate sheet and attach it to this form, if necessary, quoting section C32

C32.1 Name and address of the company	C32.2 Company registration no./Unified social credit code (USC Code)	C32.3 Number of shares you held/hold	C32.4 Nominal Value of each Share (Currency)	C32.5 Number of shares you paid up	C32.6 Date when you paid your shares	C32.7 Total No of <u>authorised</u> shares in the company	C32.8 Total No of <u>issued</u> Shares in the company	C32.9 Total No of <u>paid up</u> shares in the company	C32.10 Your percentage shareholding (%)	C32.11 Role/s

Part D – Tax

By signing this form, I confirm that I am fully aware that the permanent residency granted under the Malta Residence and Visa Programme does not provide any tax related status or benefits.

Part E – General Data Protection Regulation EU 2016/679 (GDPR) Declaration

I [*name*] of [*address*]
confirm that I have read and fully understood the contents of the attached Form MRVP10 - General Data Protection Regulation EU 2016/679 (GDPR) Declaration Form and declare that I consent to my personal data being processed under the grounds and for the purposes of my application for a certificate in terms of the Malta Residence and Visa Programme Regulations S.L. 217.18 as subject to the contents of the said Form MRVP10, that I am in agreement with the said contents, and that I have consciously signed the said Form MRVP 10 in the appropriate section in acceptance thereof.

Name: _____

Signature: _____

Date: _____

Part F – Declaration & Signature

I have read and understood all the requirements in this Form and that information supplied on or with this Form, on any attachments, whether supplied directly by myself or through a third party completing the Form on my behalf, are true, correct and up-to-date in every detail. I understand that if I supply false or inaccurate information, or omitted information requested in this Form, my application will be refused, even if this is found at a later stage.

F1. Name and surname <i>(in block letters)</i>	
F2. Signature	F3. Date of signature