

Malta Permanent Residence Programme FORM MPRP 2

Personal Details



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

customercare.residencymalta@gov.mt

Please read the document list, checklist and guidelines prior to completion of this form

Please type in your response. Handwritten forms will not be accepted. Use blue ink only for signatures, tick boxes and strikethroughs. Please print only in original size.

Affix photograph here 30mm x 40mm

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 / 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 (dd/mm/yyyy)	A11. Gender			
	☐ Male ☐ Female ☐ Other			
A12. Tick as applicable				
☐ Main Applicant	☐ Benefactor			
☐ Spouse	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 th	is status was reg	istered			
A15.1 Never married	Date (dd/mm/yyyy)		Place			
A15.2 Married (if married more than once, include details in Part B)							
A15.3 Divorced							
A15.4 Legally separated							
A15.5 Widowed							
A15.6 Other (please specify)							
A16. Other countries where author applicable – continue on Part					if		
A16.1 Country	A16.2 Date of issue (dd/mm/yyyy)	A16.3 I (dd	Date of expiry l/mm/yyyy)	A16.4 Actual duration of stay	A16.5 No expiry		

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 A17)							
		A17.1 Pass	port 1	A17.2 Passport 2			
A17.3 Issui	ng country						
A17.4 Pass	port number						
A17.5 Place	e of issue						
A17.6 Date	of issue						
A17.7 Date	of expiration						
A18a. Ident	A18a. Identity card number and issuing country (mandatory for countries where applicable)						
A18a.1 ID I	No.		A18a.2 Coun	try			
A18b. Tax	Identification num	ber and issuing countr	y (mandatory for	countries where applicable)			
A18b.1 Tax	Identification num	ber	A18b.2 Coun	try			
A19. Main r	esidential address i	n full					
Line 1							
Line 2							
District							
Province							
State							
City							
Postcode							
Country							
A20. Altern	ative residential ad	dress in full (if applicab	le)				
Line 1							
Line 2							
District							
Province							
State							
City							
Postcode							
Country							
A21. Fixed	telephone number						
A22. Mobile	e telephone number						
A23. Person	nal email address						

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A24.	Current primary occupation	A25. Employment status
		Self-Employed 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, district, province, state, city, postcode, country	* 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.

Work and Business Information

TICK IF NOT APPLICABLE

	eloyment history for uding all periods of ur	the past 5 years nemployment, retirement	, self-emplo	yment, etc.)	TICK IF	NOT APPLICABLI
A33.1.1	Occupation	A33.1.2 Name of bu employer	siness or	A33.1.3	Position	
A33.1.4	City / town & Count	try	A33.1.5	Type of busin	ess	
A33.1.6 Date from	m	(dd/mm/yyyy)	A33.1.7 Date to			(dd/mm/yyyy)
A33.2.1	Occupation	A33.2.2 Name of bu employer	siness or	A33.2.3	Position	
A33.2.4	City / town & Count	try	A33.2.5	Type of busin	ess	
A33.2.6 Date from	n	(dd/mm/yyyy)	A33.2.7 Date to			(dd/mm/yyyy)
A33.3.1	Occupation	A33.3.2 Name of bu employer	siness or	A33.3.3	Position	
A33.3.4	City / town & Count	l try	A33.3.5	Type of busin	ess	
A33.3.6 Date from	n	(dd/mm/yyyy)	A33.3.7 Date to			(dd/mm/yyyy)

A33.4.1 Oc	cupation	A33.4.2 Name of bus employer	siness or	A33.4.3 Position	
A33.4.4 Cit	ty / town & Country	<i>'</i>	А33.4.5 Тур	oe of business	
A33.4.6 Date from		(dd/mm/yyyy)	A33.4.7 Date to		(dd/mm/yyyy)
A33.5.1 Oc	ccupation	A33.5.2 Name of busemployer	siness or	A33.5.3 Position	
A33.5.4 Cit	ty / town & Country	,	А33.5.5 Тур	pe of business	

A34. Details of Parent 1 (biological or adoptive)

A33.5.6 Date from

A34.1	Title (Mr / Mrs / Ms / Other)		A34.2	If applicable	, full lega	Il name in ethnic script
A34.3	Full legal surname		A34.4	Full legal firs	st / given	names
A34.5	Place of birth (city & country)	A34.	.6 Citize	enship(s)	A34.7	Date of birth (dd/mm/yyyy)

(dd/mm/yyyy)

A33.5.7 Date to

A35. Details of Parent 2 (biological or adoptive)

A35.1	Title (Mr / Mrs / Ms / Other)		A35.2	If applicable	, full lega	Il name in ethnic script
A35.3	Full legal surname		A35.4	Full legal firs	st / given	names
A35.5	Place of birth (city & country)	A35.	.6 Citize	enship(s)	A35.7	Date of birth (dd/mm/yyyy)

(dd/mm/yyyy)

Part B - Additional information

Additional information and/or description of attachments

B2. Details	B1. Section number

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 Residency Malta Agency will be remitted. If you fail to provide these details and/or if you remit funds to a Residency Malta Agency bank account from an account that is different from that declared here, then funds will be returned and processing of the application stops.

Bank statements of the below-specified account, covering a minimum of the previous three (3) months, from which funds for the MPRP are being remitted, are required. Statements of bank accounts which have been recently opened, are not active, or which show a zero balance, will <u>not be accepted unless</u> 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	C2.1 Bank SWIFT code
C3.	IBAN	

C4.	Bank name			
C5.	Bank address (in full)			
Sourc	ce of Funds			
	ce - Source of funds is the acti enerated, that will be used to fu			mployment from which the funds have ogramme application.
C6.	Are you:			
	Self-Employed	Empl	oyee of a company	Retired
Com Sect	plete Source of Funds - ion 1	Complete Section 2	e Source of Funds - 2	Complete Source of Funds - Section 3
Guidan				ess or trade that you own/control. ce sheets, profit & loss accounts, etc)
C7.	What is your annual income? (in USD, EUF	R, GBP, RMB, other)	
C8.	What is your business/compa	ny position	n?	
C9.	Business name			
C10.	Country of incorporation/regis	stration	C11. Date of incorporat	ti on/registration (dd/mm/yyyy)
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 do business)	business a	activities (e.g. the location o	of the principal markets in which you

Section 2 - Employee of a company

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

 ${\it Please provide supporting evidence of your declared income (example: bank statements showing direct salary credit, tax returns, payslips, etc.)}$

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 throug investments, insurance, rental income, etc. Please provide supporting evidence	gh retirement saving assets, pensions, stocks, mutual funds				
C25. What is your annual retirement income? – if ap	p plicable (in USD, EUR, GBP, RMB, other)				
C26. How is your annual retirement income general consulting, etc.) Please continue on a separate sheet and attach it to the second sec	his form, if necessary, quoting section C26				
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 <u>detailed statement</u> 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 from employment 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 (name of employer and position held)

C21 10	Total declared lifetime income from employment:	
C3 1. 1U	Total declared inetime income from embloyment.	

C31.11 Other income over the years (donations, dividends, sale of property, investment, divorce settlement, etc.)

C31.12 Date	C31.13 Currency	C31.14 Amount	C31.15 Equivalent in declared currency	C31.16 Details and information of the declared income

C31.17 Total lifetime income from other sources:				
C31.18 Total declared lifetime income (C31.10 + C31.17)				

C31.19 Accumulated Wealth - Financial Assets (example: bank deposits, investment portfolios, funds)

C31.20 Wealth Type*	C31.21 Currency	C31.22 Amount	C31.23 Equivalent in declared currency	C31.24 Details & Information	C31.25 Docs provided?	
C31.26 Total Declared Financial Assets in declared currency:						

C31.28 Accumulated wealth - Non-Financial Assets (example: real estate, company capital, valuables)

C31.29 Wealth Type*	C31.30 Currency	C31.31 Amount	C31.32 Equivalent in declared currency	C31.33 Details & Information	C31.34 Docs provided?

C31.35 Total Declared Non-Financial Assets in declared currency:	
C31.36 Total <u>Evidenced</u> Non-Financial Assets in declared currency:	

C31.27 Total Evidenced Financial Assets in declared currency:

- $\ensuremath{^{\star}}\xspace\ensuremath{\text{Values}}$ 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 Company Name	
C32.2 Company registration number & Jurisdiction	
C32.3 Your percentage shareholding (%)	
C32.4 Total shares you subscribed to	
C32.5 Total shares you paid-up	
C32.6 Total Investment Cost	
C32.7 Investment Date	
C32.8 Role/s Held	

Part D - Tax

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

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

l,			(name) of
			(address line 1)
			(address line 2)
		(Province)	
	(City)	(Post Code)	(Country)
Protection Regulation E being processed under Permanent Residence F	EU 2016/679 (GDPR) De the grounds and for the Programme Regulations with the said contents, a	If the contents of the attached Feclaration Form and declare that purposes of my application for a cS.L. 217.26 as subject to the contend that I have consciously signed	I consent to my personal data certificate in terms of the Malta ents of the said Form MPRP 10,
Name:			
Signature:			
Date (dd/mm/yyyy):			
Form, on any attachmen on my behalf, are true, c	tood all the requireme its, whether supplied d correct and up-to-date	nts in this Form and that inforn irectly by myself or through a tl in every detail. I understand tha in this Form, my application will	hird party completing the Forn at if I supply false or inaccurate
F1. Name and surname	e (in block letters)		
F2. Signature		F3. Date of s	ignature (dd/mm/yyyy)