



# Malta Permanent Residence Programme

## FORM MPRP 4

### Dependant Declaration – Adult



RESIDENCY MALTA  
A G E N C Y

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

**[clientrelations.residencymalta@gov.mt](mailto:clientrelations.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.

## Part A - Details of Dependant

<b>Full legal name and surname</b> (as per passport):
<b>Address:</b> _____ _____ _____ _____ _____ _____ _____ _____ (City) _____ (Post Code) _____ (Country)
<b>Identification document number</b> (ID/Passport):

## Part B – Declarations of Dependant

Please read the declarations below and make the affirmations by deleting whichever option does not apply.

I declare that:

<b>B1. I have / have never</b> served in the armed forces of a country, or received military training;
<b>B2. I have / have never</b> been part of a military/paramilitary organisation;

If you have served in the armed forces, received military training or been part of a military and/or paramilitary organisation, please give country, dates, branch of service, unit number(s), rank(s), dates and places of any active combat, reason for end of service(s) and enclose certified evidence of service(s) on an attached sheet quoting the part (B1–B2) to which it pertains. It is recommended that you provide as much supporting information and documentation as possible.

<b>B3. I have / have never</b> been arrested, charged, convicted, or charged and acquitted of a crime(s) against the law of a country;
<b>B4. I have / have never</b> been charged/accused of illegal activity in a country;
<b>B5. I have / have never</b> been directly/indirectly involved in the financing of terrorism/terrorist activities;
<b>B6. I have / have never</b> been directly/indirectly involved in a terrorist/criminal organisation;
<b>B7. I have / have never</b> personally or as an executive/director of a company been under investigation by a law enforcement agency/tax authority in a country;
<b>B8. I have / have never</b> , personally or as an executive/director of a company been involved in bankruptcy/insolvency/liquidation;
<b>B9. I have / have never</b> been refused admission to/been unlawfully present in/deported from a country;
<b>B10. I have / have never</b> assisted someone to unlawfully enter/be present/leave a country;
<b>B11. I have / have never</b> been refused a residence permit by a country;
<b>B12. I have / have never</b> had an application for citizenship refused by country;

If you have affirmed by the phrase "I have" to any statement between B3–B12, you are required to provide a detailed explanation on an attached sheet quoting the part (B3–B12) to which it pertains. It is recommended that you provide as much supporting information and documentation as possible.

**B13. I am / am not** considered a Politically Exposed Person (PEP);

A PEP is any individual who is currently an office holder or has been an office holder in the past, or individuals who are or were formerly entrusted with high level public functions, such as senior politicians, heads of state of governments, senior judicial or military officials, officials of political parties and senior executives of state-owned enterprises. PEP definition also includes family members and close associates of a primary PEP.

*(If you are to be considered a PEP, you are required to provide a detailed explanation on an attached sheet quoting Part B13.)*

**B14. I confirm/cannot confirm** that my wealth has been obtained from completely legitimate sources, and is not, whether directly or indirectly, derived from the proceeds of criminal activities of any kind;

**B15. I confirm/cannot confirm** that I have read and understood the provisions of the Malta Permanent Residence Programme Regulations S.L. 217.26

*If you have opted to confirm any statement between B14–B15, provide a detailed explanation on an attached sheet quoting the part to which it pertains. It is recommended that you provide as much supporting information and documentation as possible.*

Please tick here  if there is more information on an attached sheet, quoting the part number (B14-B15)

**General Data Protection Regulation EU 2016/679 (GDPR) Declaration**

I, \_\_\_\_\_ (name) of  
\_\_\_\_\_ (address line 1)  
\_\_\_\_\_ (address line 2)  
\_\_\_\_\_ (District) \_\_\_\_\_ (Province) \_\_\_\_\_ (State)  
\_\_\_\_\_ (City) \_\_\_\_\_ (Post Code) \_\_\_\_\_ (Country)

confirm that I have read and fully understood the contents of the attached Form MPRP 10 - 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 Permanent Residence Programme Regulations S.L. 217.26 as subject to the contents of the said Form MPRP 10, that I am in agreement with the said contents, and that I have consciously signed the said Form MPRP 10 in the appropriate section in acceptance thereof.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I declare that:

- I understand that Residency Malta Agency reserves the right to verify any personal information relating to me, my family and/or other Dependants, and may carry out due diligence exercises for the purposes of this application both prior to, and following, the granting of such application;
- I am also aware that in the course of such verification process, Residency Malta Agency may:
  - disclose to third parties any personal information about me and/or my family and/or my Dependants; and
  - obtain from public sources, government bodies and/or private agencies further information, credit reports, criminal records and/or any other kind of records deemed necessary, about me and/or my family and/or my dependants;

and to this effect I hereby release Residency Malta Agency from any responsibility and/or liability.

**Declaration**

- I have read and understood all the requirements in this Form.
- I declare that information supplied on all my Forms and 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 and I assume full responsibility of such information and documents.
- I understand that if I supply false or inaccurate information, or omitted information requested in all my Forms, declarations and documentation, my application will be refused, even if this is found at a later stage.

**Date and signature of Dependant**

<b>Signature</b>	<b>Date of signature</b>
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