

Malta Residence and Visa Programme FORM MRVP2

Personal Details



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

clientrelations.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.

Affix photograph here 30mm x 40mm

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

Part A

A1. Title (Mr / Mrs / Miss / Ms / O	ther)	A2. If applicable, full legal name in ethnic script
A3. Full legal surname (exactly a	as per passport)	A4. Full legal given name(s) (exactly as per passport)
A5. Full legal first and middle na birth certificate, only if different fro		A6. If applicable, explanation for difference in A4 and A5
A7. Other names including nam	e at birth, maide	n 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
D D M M Y Y Y Y	Male Female
A12. Tick as applicable:	

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											
A15.1 Never married												
□ A15.2 Married (if married more than once, include details in Part B)	D	D		Μ	Μ		Y	Y	Y	Y		
A15.3 Divorced	D	D		Μ	Μ		Y	Y	Υ	Y		
A15.4 Legally separated	D	D		Μ	Μ		Y	Y	Υ	Y		
□ A15.5 Widowed	D	D		Μ	Μ		Y	Y	Υ	Υ		
□ A15.6 Other (please specify)	D	D		Μ	Μ		Y	Y	Y	Y		

																			•	luding validity dat section A17)	es if
A16.1 Country	16.1 Country A16.2 Date of issue											A1	6.3	Date		A16.4 Actual duration of stay	A16.5 No expiry				
	D	D		M	Μ		Υ	Υ	Υ	Υ	D	D		Μ	Μ	Υ	Υ	Υ	Υ		
	D	D		M	M		Υ	Υ	Υ	Υ	D	D		Μ	Μ	Υ	Υ	Υ	Υ		
	D	D		Μ	Μ		Υ	Υ	Υ	Υ	D	D		Μ	Μ	Υ	Υ	Υ	Υ		
	D	D		M	Μ		Υ	Υ	Υ	Υ	D	D		Μ	Μ	Υ	Υ	Υ	Υ		

A17. Passport details (if a hol on Part B or on additional page	der of multiple valid pass s if necessary quoting S	sports, all pass section A18)	sport details must be provided – continue
	A17.1 Passport		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 a	nd issuing country (ma	andatory for co	ountries where applicable)
A18a.1 ID No.		A18a.2 Cou	intry
			for countries where applicable)
A18b.1 Tax Identification num	nber	A18b.2 Cou	intry
A19. Main residential addres	s in full	A20. Alterna (if applicable	ative principal residential address in full e)
A21. Fixed telephone numbe	A22. Mobile teleph	one number	A23. Personal email address

Work and Business Information

□ TICK IF NOT APPLICABLE

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

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 DICK IF NOT APPLICABLE periods of unemployment, retirement, self-employment, etc.)

A33.1.1 Occu	pation	A33.1.2	Name	of bus	siness or employ	A33.	1.3 Po	ositio	n			
A33.1.4 City /	town & Country	<u> </u>			A33.1.5 Type	of bus	iness					
A33.1.6 Date from	MM	Y Y	Y	Y	A33.1.7 Date to	M	\mathbb{M}		Y	Y	Y	Y

A33.2.1 Occu		A33	.2.2	Name	of bus	siness or employ	ər	A33.2.3 Position								
A33.2.4 City /	town &	k Cou	ntry	l				A33.2.5 Type	of busi	iness						
A33.2.6 Date from						Y	Y	A33.2.7 Date to	Μ	M		Y	Y	Y	Y	

A33.3.1 Occu		A33	8.3.2	Name	of bu	siness or employ	er	A34.3.3 Position								
A33.3.4 City /	Town	& Cou	ntry					A33.3.5 Type	of busi	iness						
A33.3.6 Date from	Μ	Μ		Y	Y	Y	Y	A33.3.7 Date to	Μ	Μ		Y	Y	Y	Y	

A33.4.1 Occup		A33	.4.2	Name	of bus	siness or employ	A33.4.3 Position								
A33.4.4 City /	Town	& cou	ntry					A33.4.5 Type	of bus	iness					
A33.4.6 Date from							Y	A33.4.7 Date to	M	\mathbb{M}		Y	Y	Y	Y

A33.5.1 Occup	ation			A33	3 .5.2 M	Name	of bus	siness or employ	A33.5.3 Position							
A33.5.4 City / ⁻	Town	& Cou	intry	•				A33.5.5 Type	of bus	iness						
A33.5.6 Date from	M	Μ		Y	Y	Y	Y	A33.5.7 Date to	Μ	M		Y	Y	Y	Y	

A34. Details of Parent 1 (biological or adoptive)

A34.1 Title (Mr / Mrs / Miss / Ms / Oth	A34.2 If applicable, full legal name in ethnic script											
A34.3 Full legal surname		A34.4 Full lega	al fir	st /	give	n na	ime	5				
A34.5 Place of birth (city & country) A34.6 (Citizenship(s)	A3	4.7	Date	e of	birtl	h				
			D	D		Μ	Μ		Y	Y	Y	Υ

A35. Details of Parent 2 (biological or adoptive)

A35.1 Title (Mr / Mrs / Miss / Ms / Ot	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)	A3	85.7	Date	e of	birt	h				
			D	D		Μ	Μ		Υ	Y	Υ	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 <u>the balance of funds payable to the Residency Malta</u> <u>Agency will be remitted</u>. 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 <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	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:

□ Self-Employed	Employee of a company	□ 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 po	osition?										
C9. Business name											
C10. Country of incorporation/registration	tion	C11.	Date o	of incor	rpora	tion/re	egistra	ation			
	D	D		Μ	M		Y	Y	Y	Y	
C12. Registered office address (in full) C13. Mailing address (if different from registered addre								ess)			
C14. Business telephone number	C15. Business/you	our email address C16. Business website addre						dress			
C17. Nature of the business											
C18. Geographical sphere(s) of the bus business)	siness activities (e.	g. the	locatio	n of the	e prino	cipal m	narkets	in wh	ich yo	u do	

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.) Please continue on a separate sheet and attach it to this form, if necessary, quoting section C26
Please continue on a separate sheet and attach it to this form, if necessary, quoting section C20
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.	C28. What is your estimated total net worth? (in USD, EUR, GBP, RMB, other)								
C 20	Please provide a detailed statement of how you have accumulated your estimated total net worth								
629.	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)								
1									

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

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

C31.10 Total declared <u>lifetime</u> 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 :	*Values for wealth should be one of the following:1 Bank deposits (this will be part of liquidity)
C31.19 Total evidenced	2 Financial assets (this will be part of liquidity)
wealth in declared	3 Real estate
currency:	4 Company capital
C31.20 Total evidenced	5 Valuables
liquidity in declared	6 Cars, yachts, etc
currency:	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

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

			1	
11	name] of [address	S	J	
confirm that I have re	ead and fully understood the	he contents of the attached	Form MRVP10 -	
General Data Protecti	on Regulation EU 2016/679	9 (GDPR) Declaration Form a	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 (in block letters)		
F2. Signature	F3. Date of signature	