o form H.1





## **EXPATRIATES UNIT**

## APPLICATION FOR A SPECIFIC RESIDENCE AUTHORISATION AS A FAMILY MEMEBER

| <b>01</b> PERSONAL DETA   | lls  | OF   | AP    | PLI   | CA         | NT   |          |          |          |      |       | ,     |      |      |     |      |     |     |    |     |     |          |      | i   | ,        |      |      |      |     |      |      |       | ı    |      |
|---|------|------|-------|-------|------------|------|----------|----------|----------|------|-------|-------|------|------|-----|------|-----|-----|----|-----|-----|----------|------|-----|----------|------|------|------|-----|------|------|-------|------|------|
| Specific Residence Authority Applicable   | oris | sati | ion I | No.   | . <b>:</b> |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Date of Issue:  |      |      |       |       | D          | D    | M        | M        | 1        |      |       | Y     | Y    |      |     |      |     |     |    |     |     | ٧        | alio | d U | ntil     | D    |      |      | М   | М    | Υ    | Υ     | Υ    | Υ    |
| Surname:  |      |      |       |       |            |      | _        | Ţ        | _        |      |       |       |      |      |     |      |     |     |    |     |     | Ļ        |      |     |          | Ţ    |      |      |     |      |      |       | L    |      |
| Name:   |      |      |       |       |            |      |          | 1        |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          | _    |      |      |     |      |      |       | L    |      |
| Middle Name (if applica   | ble  | ):   |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Sex:  |      |      |       |       |            | ] N  | Mal      | е        | [        |      | Fe    | mc    | lle  |      |     | 0    | the | er  |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Date of Birth:  |      |      |       |       | D          | D    | M        | M        | 1 \      |      | / \ \ | Y     | Υ    |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Telephone No:   |      |      |       |       | L          |      | Ļ        | _        | _        |      | 1     |       | _    | _    |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Mobile No:  |      |      |       |       |            |      | $\perp$  | $\perp$  | _        |      |       |       | _    |      | _   |      |     |     |    | ı   | 1   | 1        | 1    | 1   | 1        | 1    | 1    |      |     |      | ı    | ı     | ı    | 1 1  |
| Email:  |      |      |       |       | L          |      |          | Ļ        | _        |      |       | _     |      |      |     |      |     |     |    |     |     | L        |      |     |          |      |      |      | _   |      |      | L     | L    | Ш    |
| Current Nationality:  |      |      |       |       |            |      | _        | _        | _        | _    |       | 4     | _    | _    |     | _    |     |     |    |     |     | _        |      |     |          | _    | _    | _    | _   |      |      |       | Ļ    | Ш    |
| Nationality at Birth:   |      |      |       |       |            |      | <u> </u> | <u> </u> | 1        |      |       | _     |      |      |     |      |     |     |    |     |     | <u> </u> |      |     | <u> </u> | ļ    |      | _    | _   |      |      |       | L    | Ш    |
| Country of Birth:   |      |      |       |       | L          |      | _        |          | <u> </u> |      |       | _     | _    | _    |     |      |     |     |    |     |     | <u> </u> |      |     |          | Ļ    |      |      | _   |      |      | L     | Ļ    |      |
| Place of Birth:   |      |      |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       | L    |      |
| Marital Status  |      |      |       |       |            | Si   | ngl      | le       |          | М    | arr   | ied   |      | _    | Sej | oer  | ate | ed  |    | D   | ivo | rce      | ed   |     | W        | /idc | w    | ed   |     |      | Co   | hal   | oito | ınt  |
|   |      |      |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Signature of Applicant  |      |      |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      | Do  | ate:     | D    |      |      | М   | М    | Υ    | Υ     | Υ    | Υ    |
| You are being reminded to criminal responsibility in a Immigration Act (Chapter unlawful declaration. | icco | orda | ince  | e wit | th A       | rtic | les      | 188      | an       | d 18 | 39 c  | of th | ne C | Crim | nin | al C | od  | e(C | ha | pte | r 9 | of t     | he   | Lav | vs o     | f Mo | alto | a) ( | anc | d Ar | ticl | le 32 | 2 of | the  |
| 02 ADDRESS IN MAI   | LTA  |      |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Property No.:   |      |      |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Property Name:  |      |      |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      |      |
| Street Name:  |      |      |       |       |            |      |          |          |          |      |       | İ     |      |      | i   |      |     |     |    |     |     |          |      |     |          |      |      | İ    | _   |      |      |       |      |      |
| Locality:   |      |      |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      |      |      |     |      |      |       |      | <br> |
| Postal Code:  |      |      |       |       |            |      |          |          |          |      |       |       |      |      |     |      |     |     |    |     |     |          |      |     |          |      | 1    |      |     |      |      |       |      | ш    |

| 03 PERSONAL DET   | [AILS  | 5 O      | FT          | ΉE        | SP        | <b>10</b> | ISC       | OR   | GI  | RAI | NT      | ED      | RE | SIE | E  | NC | E II | N M      | IAL        | .TA |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
|---|--------|----------|-------------|-----------|-----------|-----------|-----------|------|-----|-----|---------|---------|----|-----|----|----|------|----------|------------|-----|----|---|---|---|------|-----|------|----|---|---|---|---------|---------|---------|------|---------|
| Residence Permit No.:   | Ļ      | Ļ        | Ļ           | Ļ         | ļ         | _         |           |      |     | L   | Ļ       | 1       | 1  |     |    | L  | _    | A        |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| Surname:  | L      | Ļ        | <u> </u>    | <u> </u>  |           |           |           |      |     |     | _       |         | _  |     |    | L  |      | <u> </u> | 1          |     |    |   |   |   |      |     |      |    |   |   | Ļ | Ļ       | Ļ       | Ļ       | Ļ    |         |
| Name:   | L      |          |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   | L |         | L       | $\perp$ |      |         |
| Maiden Surname<br>(if applicable):                              |        |          |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   | L       | $\perp$ | $\perp$ |      |         |
| Relationship of the fam   | nily r | mer      | mb          | er        | to        | the       | s s       | 001  | nsc | or  |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
|   |        |          | Sp          | ou        | se        | of        | the       | e s  | ро  | nse | or (    | (ov     | er | 21  | ye | ar | s 0  | f a      | ge         | )   |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
|   |        |          | Mi          | no        | r cl      | hilo      | o         | f tl | he  | sp  | ons     | sor     | (u | ınd | er | 18 | ye   | ars      | <b>o</b> 1 | fa  | ge | ) |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| Date of first settlemen in Malta:                               | t      | D        | М           | M         | 1 \       |           |           | Υ    | Υ   |     | 1       | 1       | ı  | ı   |    | ı  | ı    | 1        | 1          | 1   | ı  |   | ı |   | ı    | ı   | ı    |    |   | ı | ı | 1       | ı       | ı       | ı    | 1       |
| Type of Permit:   | Ļ      | _        |             |           |           | _         | _         |      |     | L   |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      | _  |   | Ļ | Ļ | Ļ       | Ļ       | Ļ       | _    |         |
| Date of Issue:  | D      | D        | М           | M         | 1         | ( )       | ′         | Υ    | Υ   |     |         |         |    |     |    |    |      |          |            |     |    |   |   | V | alic | l U | ntil | l: | D | D | М | I       | I Y     | Y       | Υ    | Y       |
| O4 DECLARATION  I, hereby, declare that application form, which | the    | e ap     | opli<br>wne | ica<br>ed | nt,<br>or | , wi      | hos       |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| applicant cease to resi   | ide c  | ıt t     | his         | ac        | ldr       | ess       | <b>5.</b> |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| Name of landlord:<br>(IN BLOCK LETTERS)                         | L      | <u>L</u> | <u> </u>    | 1         | 1         |           |           |      |     |     | 1       |         |    |     |    | L  |      | <u> </u> |            |     |    |   |   |   |      |     |      |    |   |   |   |         | <u></u> | <u></u> |      |         |
| ID. card no.:   |        |          |             | L         |           |           |           |      |     |     | L       | <u></u> |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| Mobile No.:   | L      |          |             |           |           |           |           |      |     |     | <u></u> |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| Number of Persons Res   | idin   | g ir     | 1 th        | nis       | Res       | side      | end       | ce:  | :   |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| Landlord's Address:   |        | _        |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   | <u></u> | <u></u> | <u></u> |      |         |
|   |        |          |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| Email address:  |        |          |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      | <u></u> |
| Signature of Landlord   |        |          |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      | D   | at   | e: | D | D | M | I M     | 1 Y     | · Y     | ′ Y  | Y       |
| 05 DECLARATION  | BY 7   | THE      | E L/        | ANI       | DLO       | ORI       | D         |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   |         |         |         |      |         |
| I hereby solemnly deck<br>that no details have be               |        |          |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      |     |      |    |   |   |   | e a     | ınd     | be      | lief | anc     |
| Sponsor's Signature   | -      |          |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      | D   | at   | е  | D | D | M | I M     | 1 Y     | Y       | Y    | Y       |
| Family Member's Signa   | ture   | <u>)</u> |             |           |           |           |           |      |     |     |         |         |    |     |    |    |      |          |            |     |    |   |   |   |      | D   | at   | е  | D | D | M | 1       | 1 Y     | ' Y     | Y    | Y       |

| <b>U6</b> | PERSONAL DETAILS OF THE SPONSOR GRANTED RESIDENCE IN MALTA   |
|-----------|--|
| ☐ A c     | copy of the sponsor's Maltese residence permit copy of the documents attesting the family relationship that exists with the sponsor such as marriage rificates, registration certificates and birth certificates; of that the sponsor is still eligible for Specific Residence Authorisation; copy of the approval letter from the Housing Authority that the lease agreement has been registered. |
|           | NOTES TO ADDITIONALS   |

## **NOTES TO APPLICANTS**

Documents in a foreign language must be translated to Maltese or English by a translator registered with the Maltese authorities.

Identity Malta retains certified/apostilled copies of the said documents where original documentation would not be possible to retain. Family members must present the original documents once they are in Malta.

Identity Malta and other related stakeholders reserve the right to request any further documentation that they may deem necessary in the evaluation process of the application.

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