



**EXPATRIATES UNIT
SELF-EMPLOYED
RENEWAL APPLICATION FORM**

01 APPLICANT'S DETAILS

Identity Document No. _____ **A**

Surname _____

Name _____

Nationality _____

Marital Status Single Married Separated Divorced Widowed

Gender Male Female Unspecified

Passport No. _____

Date of Issue _____ Valid Until _____

Date of first settlement in Malta _____

Intended Duration of stay in Malta _____

Country of Residence prior to Settlement in Malta _____

Currently residing in _____

Intended Country of Next Settlement _____

Address in Malta _____

_____ Post Code _____

Telephone No. _____

Mobile No. _____

Email Address _____

02 DECLARATION BY THE APPLICANT

I, hereby, declare that the information given in this application is true to the best of my knowledge and belief, and that no details that could be of direct importance during the application's consideration have been omitted. I also declare that I shall notify Identità of any change of address.

Applicant's Signature

Date

03 EMPLOYMENT DETAILS

Employer's/Company's Name _____

Employer's Address _____

_____ **Post Code** _____

Telephone No. _____ **Mobile No.** _____

Email Address _____

Responsible Official _____

Designation of Responsible Official _____

VAT Registration No. _____

Employer Registration No. _____

04 DECLARATION BY THE LANDLORD

I, hereby, declare that the applicant, whose details are shown above, is residing in the address shown in SECTION 01 of the application form, which is owned or managed by the undersigned. I also declare that I will notify Identità should the applicant cease to continue residing at this address.

Name of landlord
(IN BLOCK LETTERS) _____

ID Card No. _____

Mobile No. _____

Number of Persons
Residing in this Residence _____

Address of Landlord _____

_____ Post Code _____

Email Address _____

Landlord's Signature

Date

05 EMPLOYMENT LICENCE DECLARATION

I, hereby confirm that Jobsplus have issued me with an employment licence in order to carry out self-employment activities which licence I am attaching herewith to this application.

I am also committing myself to provide Identità with any relevant information on changes and events related to my employment contract.

I also declare, that such employment is in line with all the applicable laws in Malta.

Applicant's Signature

Date

IDENTITÀ
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E enquiries.identita@gov.mt

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