

APPLICATION FOR RESIDENCE PERMIT (RETIRED NON-CITIZEN) [Section 9B of the Immigration Act]

(Please read the attached guidelines carefully BEFORE filling this form)

BOI Registration Number:

SECTION 1 - PERSONAL DETAILS OF RETIRED NON-CITIZEN (THE APPLICANT)

1.1 Surname			
1.2 Given Names			
1.3 Maiden Name (If any)			
1.4 Any Previous Name			
1.5 Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	1.6 Marital Status	Single <input type="checkbox"/>	Married <input type="checkbox"/> Divorced <input type="checkbox"/> Other
1.7 Date Of Birth Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1.8 Country of Birth		
1.9 Present Nationality: Date acquired: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Day Month Year	1.10 Any other nationality held: Date acquired: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Day Month Year		
1.11 Have you ever renounced any nationality? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state which one and why?			

1.12 Passport No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1.13 Issuing Country
1.14 Date of Issue Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1.15 Date of expiry Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
1.16 If you have any other residence permit of any other country, please give details: Country: 1.2.		
1.17(1) Date of issue Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1.18 (1) Date of expiry Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
1.17(2) Date of issue Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1.18 (2) Date of expiry Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
1.19 Residential Address in your country of origin		
Tel No:		Fax No:

1.20 Address of last place of residence, if different from above

Tel No:

Fax No:

1.21 Do you hold the right of re-entry into your:

(a) country of origin? Yes No Date of expiry of right:
Day Month Year

(b) last place of residence? Yes No Date of expiry of right:
Day Month Year

1.22 If No to any of the above, please give details:

1.23 Residential address in Mauritius

Tel No: Fax No: Mobile No:

Email Address:

SECTION 2 - SECURITY/HEALTH QUESTIONS (please tick as appropriate)

2.1 Have you or your spouse ever been convicted of any crime in any country? Yes No

2.2 Is a criminal/civil case pending against you in any country? Yes No

2.3 Are you or your spouse suffering from any infectious or contagious disease? Yes No

If the reply to any of the above questions is **Yes**, please give full details below, attaching relevant documents if any

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Section 3 - DECLARATION

I declare that all the information given in this application form as well as in the attached documents is true and correct.

I / We understand that making a false statement is a serious offence and may lead to prosecution and cancellation of a Residence Permit.

Signature of applicant:

Date:
Day Month Year