

# Application for Long Term Business Visa and Permit



For help completing this form, refer to the *“Guide to Applying for Long Term Business Visa and Permit”* (NZIS 1059). Immigration Advisers Licensing Act 2007

Under the Immigration Advisers Licensing Act 2007, anyone giving immigration advice will have to be licensed (unless they are exempt). From 4 May 2009, all immigration advisers working in New Zealand must be licensed. From 4 May 2010, all immigration advisers, whether working onshore or offshore, must be licensed. It is an offence to provide immigration advice without holding a licence from these dates.

If your immigration adviser is not licensed when they should be, Immigration New Zealand will return your application.

For more information and to view the Register of licensed advisers, go to the Immigration Advisers Authority website [www.iaa.govt.nz](http://www.iaa.govt.nz), email [info@iaa.govt.nz](mailto:info@iaa.govt.nz), or write to them at PO Box 6222, Wellesley Street, Auckland 1141, New Zealand.

**Note:** If there is not enough room on this application form to answer a question fully, please answer on a separate sheet of paper and state on the form that you have done so. Please sign each additional sheet of paper.

## Section A Personal Details

### Principal applicant

Client number:

**A1** Name as shown in passport

Family:  Given:

**A2** Preferred title Mr  Mrs  Ms  Miss  Dr  other   
(please specify)

**A3** Other names you are known by

**A4** Your name in ethnic script

**A5** Gender Male  Female

**A6** Date of birth     
day month year

**A7** Place and country of birth Place:  Country:

**A8** Passport details Number:  Country:

**A9** Other citizenships currently held

Pin or staple two recent passport size photographs of yourself here. Write your name on the back of each photograph.

**A10**

Your current home address and telephone number.


Phone/day:	
Phone/night:	
Fax:	
Email:	

Address in your home country


**A11**

Name and address for communication about this application

- Same as address at A10  
 Other

Include company name and address (if applicable)


Phone/day:	
Phone/night:	
Fax:	
Email:	

Do you authorise the person stated at A11 to act on your behalf?

- Yes  No

**A12**

Have you received immigration advice on this application?

- Yes Please make sure that your immigration adviser completes **Section H: Immigration Adviser's Details.**  
 No

**A13**

You can check the progress of your application online by registering for our online enquiry system. By ticking this option you will also be advised by email when your application has been decided.

(Note: this facility is only available for applications lodged at an Immigration New Zealand branch office listed in the "More Information and Advice" section of this form.)

**A14**

- Please email me instructions to register to check my application online.

**Note:** If you elect an adviser to act on your behalf your adviser will be sent instructions for online enquiry.

Immigration adviser reference code for online enquiries. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Note:** This is not the adviser's licence number.

Use a unique reference for each client – (up to 10 characters: no more than three letters permitted, eg A123, B1234B, or 1234C567CC are acceptable. Don't use punctuation marks or symbols.) This code will appear in any email notifications to an adviser acting on behalf of an applicant.

**A15**

Give details of ALL your family, whether migrating with you or not, including those adopted legally or by custom. It is not necessary to list deceased family members.

Full name	Gender M/F	Date of birth	Partnership status	Country of residence
-----------	---------------	---------------	--------------------	----------------------

Parents (biological and adoptive). If both parents are deceased give details of legal guardians (if any) and/or grandparents.


Brothers and sisters (including half, step and adopted brothers and sisters).


Full name	Gender M/F	Date of birth	Partnership status	Country of residence
-----------	---------------	---------------	--------------------	----------------------

Children (including biological, adopted, step-children and children from previous partnerships).

					Does the person intend to migrate with you?	
					Yes	No
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

# Partner

Attach two recent passport size photographs. Write name on back.

**A16** Name as shown in passport  
 Family:  Given:

**A17** Preferred title Mr  Mrs  Ms  Miss  Dr  other   
 (please specify)

**A18** Other names they are known by

**A19** Name in ethnic script

**A20** Gender Male  Female  **A21** Date of birth     
 day month year

**A22** Place and country of birth Place:  Country:

**A23** Passport details Number:  Country:

**A24** Other citizenships currently held

**A25** Please indicate whether your partner is applying for a work or visitor visa or permit. Work  Visitor

**A26** How long have you been living together in this partnership? Years  Months

**A27** Do you meet the minimum requirements for recognition of partnership? Yes  No

**A28** Are you living together in a genuine and stable partnership? Yes  No   
 If you are not living together please explain.

**A29** Give details of ALL your partner's family, whether migrating with you or not. It is not necessary to list deceased family members.

Full name	Gender M/F	Date of birth	Partnership status	Country of residence
-----------	---------------	---------------	-----------------------	----------------------

Parents (birth and adoptive)

<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"/>

Brothers and sisters (including full, half and adopted brothers and sisters)

<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"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Children (including from previous partnerships)

	Does the person intend to accompany you to NZ?	
	Yes	No
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Supply the following details for each dependent child included in this application

**A30**

Dependent Child 1

Child's name as shown in passport

Family:  Given:

Attach two recent passport size photographs. Write name on back.

**A31** Male  Female

**A32** Date of birth     
day month year

**A33** Country of birth

**A34** Passport number

**A35** Country of citizenship

**A36** Other citizenships currently held

**A37**

Please indicate whether your child is applying for a student or visitor visa or permit.

Student  Visitor

**A38**

Dependent Child 2

Child's name as shown in passport

Family:  Given:

Attach two recent passport size photographs. Write name on back.

**A39** Male  Female

**A40** Date of birth     
day month year

**A41** Country of birth

**A42** Passport number

**A43** Country of citizenship

**A44** Other citizenships currently held

**A45**

Please indicate whether your child is applying for a student or visitor visa or permit.

Student  Visitor

**A46**

Dependent Child 3

Child's name as shown in passport

Family:  Given:

Attach two recent passport size photographs. Write name on back.

**A47** Male  Female

**A48** Date of birth     
day month year

**A49** Country of birth

**A50** Passport number

**A51** Country of citizenship

**A52** Other citizenships currently held

**A53**

Please indicate whether your child is applying for a student or visitor visa or permit.

Student  Visitor

**A54**

Dependent Child 4

Child's name as shown in passport

Family:  Given:

Attach two recent passport size photographs. Write name on back.

**A55** Male  Female

**A56** Date of birth     
day month year

**A57** Country of birth

**A58** Passport number

**A59** Country of citizenship

**A60** Other citizenships currently held

**A61**

Please indicate whether your child is applying for a student or visitor visa or permit.

Student  Visitor

**A62**

Does any person not included in this application have custody or visitation rights over any of the above children?

No  Yes  If Yes, supply evidence that you have been granted the right to bring this child permanently to New Zealand.

## Additional Details

The following questions apply to every person included in your application 17 years of age and over.

**A63**

Do you or any of your accompanying family members have a National ID number, or other unique identifier that was issued to you by any government? Yes  No

If Yes, please list here:

Name of applicant	National ID number/unique identifier

**A64**

Have you or any of your accompanying family members undertaken military service in any country? Yes  No

If Yes, please provide a brief chronological account of your/their military service. Include the applicant's name, dates of your/their military service, your/their position/rank, unit(s) you/they served in, and your/their role within the unit(s). Please also list any military ID number(s) assigned to you or your accompanying family members.

Name of applicant	Date from (dd/mm/yy)	Date to (dd/mm/yy)	Rank	Unit	Role
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			

Military ID number(s):

Name of applicant	Military ID number

**A65**

Are you or any of your accompanying family members presently subject to military service obligations in any country? Yes  No

If No, and you or any of your accompanying family members are a citizen of a country in which compulsory military service exists, state below why you/they are exempt from military service.


**A66** Have you or any of your accompanying family members been associated with any intelligence agency or group, or law enforcement agency? Yes  No

If Yes, please specify:


**A67** Have you or any of your accompanying family members been associated with any group or organisation that has engaged in or promoted the use of violence to further their aims? Yes  No

If Yes, please specify:


**A68** Have you or any of your accompanying family members ever committed or been involved in the commission of war crimes, crimes against humanity, and/or human rights abuses? Yes  No

If Yes, please specify:


## Character requirements

Please answer **A69** and **A70** in respect of every person in your application 17 years of age and over if:

- this is your first application under LTBV policy; or
- you have held a work visa or permit under LTBV policy for three years and are applying for a further work visa or permit.

**A69**

List the countries, including all countries of citizenship, you and/or your family (if applicable) have lived in for more than five years since attaining the age of 17 and attach police certificates from each of these countries.

Name	Name of country	Date of arrival	Date of departure

**A70**

Are you and/or any of your accompanying family members currently under investigation, or wanted, by any law enforcement agency in any country?

Yes  No

Have you and/or any of your accompanying family members ever been:

- Convicted or found guilty of any offence(s) against the law in any country? Yes  No
- Sentenced to serve a period of time in prison or other form of detention? Yes  No
- Placed on probation? Yes  No
- Charged with any offences against the law in any country? Yes  No
- Deported, excluded or removed from any country, including New Zealand? Yes  No
- Asked to leave any country, including New Zealand? Yes  No
- Refused entry to any country, including New Zealand? Yes  No
- Refused a visa/permit to visit, work, study or reside in any country, including New Zealand? Yes  No
- Involved in any terrorist activities or advocated similar violent activities? Yes  No
- A member of, or adhered to, any terrorist organisation? Yes  No
- Involved in the illicit drug trade? Yes  No
- A member of, or adhered to, any organisation or group with criminal objectives or which has engaged in criminal activities or advocated such activities? Yes  No
- A member of, or adhered to, any group of persons or organisation which, at the time of membership or adherence, had objectives which were based on hostility against persons or groups of persons on the basis of their colour, race, or ethnic or national origin, or were based on a representation that persons of a particular race or colour are inherently inferior or superior to other races or colours? Yes  No
- Convicted of an offence (including a traffic offence), committed within the last five years, involving dangerous driving, driving having consumed excessive alcohol (including drunk driving and driving with a blood or breath alcohol content in excess of a specified limit) or driving having consumed drugs? Yes  No

If you answered "Yes" to any of the above questions, give full details and the name of the family member(s).


## Health requirements

- A71** Have you, and every person included in the application, completed *Medical and X-ray Certificate(s)* (NZIS 1007)? Yes  No

Please read the *Health Requirements Leaflet* (NZIS 1121) for full details of the health requirements for your application.

## English language requirements

Minimum English language requirements apply to first time applicants or applicants seeking a further three-year Long Term Business visa and permit who have not previously met English language requirements. For details see the *Guide to Applying for Long Term Business Visa and Permit* (NZIS 1059).

- A72** Do you meet the minimum standard of English language? Yes  No

If Yes, please provide evidence of your English language ability.

# Section B Business Plan Information

**Note:** If you have held a work visa or permit under LTBV policy for less than three years, you are applying for a further work visa or permit, and the business proposal consented to by INZ has not changed, you do not need to answer the questions in Sections B to F.

Questions **B1** and **B2** are for statistical purposes only. All details of a business proposal should be covered in the Business Plan.

- B1** Your intended business (tick one box only)
- |                                    |                          |                        |                          |                       |                          |
|------------------------------------|--------------------------|------------------------|--------------------------|-----------------------|--------------------------|
| Administration/customer service    | <input type="checkbox"/> | Finance                | <input type="checkbox"/> | Retail                | <input type="checkbox"/> |
| Advertising/media/public relations | <input type="checkbox"/> | Healthcare             | <input type="checkbox"/> | Sales/Marketing       | <input type="checkbox"/> |
| Agriculture/forestry/fishing       | <input type="checkbox"/> | Hospitality/restaurant | <input type="checkbox"/> | Sports                | <input type="checkbox"/> |
| Arts/culture/entertainment         | <input type="checkbox"/> | Human resources        | <input type="checkbox"/> | Telecommunication     | <input type="checkbox"/> |
| Central government                 | <input type="checkbox"/> | Information technology | <input type="checkbox"/> | Tourism/accommodation | <input type="checkbox"/> |
| Education/training                 | <input type="checkbox"/> | Legal                  | <input type="checkbox"/> | Water/gas/electricity | <input type="checkbox"/> |
| Engineering/science                | <input type="checkbox"/> | Local government       | <input type="checkbox"/> | Other (specify)       | <input type="checkbox"/> |
| Film/video                         | <input type="checkbox"/> | Manufacturing          | <input type="checkbox"/> |                       | <input type="text"/>     |

- B2** In which town or city do you intend to locate your business?

- B3** Please state the amount of funds available for the maintenance and accommodation costs of all family members included in the application. This must be sufficient for three years and must be additional to the investment capital required for your business.

Please attach evidence.

- B4** What is the status of your proposed business?  new  established

- B5** Please state the amount of funds in \$NZ that you have available to start up your proposed business.



**C6**

What is your intended involvement/role in the operation of the proposed business?


**C7**

How many full-time employees will the business require?

**C8**

What type of skills will these employees require, and are these skills readily available in New Zealand?


**C9**

Provide details of the proposed marketing strategy of the business, including details on market size, estimated market share, market positioning, competitor analysis, distribution and pricing strategy.


**C10**

Prepare a brief SWOT analysis of the proposed business – strengths, weaknesses, opportunities, threats.

<b>Strengths</b>	<b>Weaknesses</b>
<b>Opportunities</b>	<b>Threats</b>

**C11**

Provide details of the operational plan and timeline for establishing the business in New Zealand, including an estimation of the time required for establishing the company, obtaining approvals (if required), finding premises, purchasing equipment, recruiting staff and establishing a distribution network etc.


# Section D Financial Information

## Financial forecasts

**D1**

Please provide details of the start-up costs for the business, research and development, recruitment, asset purchase, including legal and professional fees etc.


**D2**

Please provide details of the forecast profit and loss statements for the business in the format detailed below. Please complete form or attach forecasts separately.

### Forecast Profit and Loss Statement

<b>NZ\$000</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>
<b>Revenue (A)</b>			
<b>Cost of sales (B):</b>			
Labour			
Overheads			
Raw materials			
.....			
<b>Gross Margin (C=A-B)</b>			
<b>Expenses (D):</b>			
Salaries			
Rent			
Depreciation			
Administration			
Audit fees			
Legal fees			
.....			
.....			
<b>Earnings before interest (E=C-D)</b>			
Interest (F)			
<b>Net Profit (G=E-F)</b>			
Tax (H =G x 33%)			
<b>Net Profit after Tax, available to shareholders (I=G-H)</b>			
<b>Ratios</b>			
Gross Margin % (= C/A x100)			
Net profit after Tax/ Revenue % (=I/A x100)			
Interest Cover – times (=E/F)			

**D3**

Please provide a three-year cash flow forecast for the proposed business, in the format detailed below. Please complete the form below or attach forecasts separately.

### Cash-flow forecasts

NZ\$000	Year 1	Year 2	Year 3
<b>Net profit after tax</b>			
Add: Depreciation			
<b>Gross cash-flow</b>			
<b>Working capital required</b>			
Debtors			
Inventory			
Creditors			
Other assets			
Creditors			
Other liabilities			
<b>Cash flow from operations (A)</b>			
<b>Financing activities</b>			
Increase/(decrease) in bank debt			
Increase/(decrease) in overdraft			
Increase/(decrease) in capital			
Dividend payments			
<b>Cash provided from financing (B)</b>			
<b>Investment activities</b>			
Sale/(purchase) of fixed assets (before depreciation)			
Increase/(decrease) in shareholder loans			
Increase/(decrease) of inter-company loans			
<b>Cash provided from investing (C)</b>			
<b>Net cash flow (D=A+B+C)</b>			
<b>Opening cash balance (E)</b>			
<b>Plus/(minus) net cash flow (F=D)</b>			
<b>Closing cash balance profits (G=E+F)</b>			

### Financing options

**D4**

What level of capital investment will the business require?  
(please attach third party evidence that you have these funds available)

**D5**

What level of capital will you bring into the business?

**D6**

Will the business require additional financing?

**D7**

How are you intending to arrange financing for your business?  
Include with your answer details of potential financiers or equity partners.




**E6** Provide details of any business or trade qualifications and university degrees, including institution, date and qualification type, and attach certified copies of these.


**E7** Does your proposed business require you to utilise any professional qualifications?

Yes     No

If Yes, please provide proof that you have obtained full registration of these qualifications in New Zealand.

## Section F Knowledge of New Zealand Market

**F1** Describe the extent of your knowledge regarding the New Zealand business environment.


**F2** Have you had any previous involvement with/in any business in New Zealand?

Yes     No

If Yes, please provide details of the involvement.


**F3** Have you made contact or sought advice from any relevant trade associations in New Zealand?

Yes     No

If Yes, please provide details of the contact.


**F4** Have you commissioned any independent research regarding the potential and the viability of your proposed business in New Zealand?

Yes     No

If Yes, please provide details of the research.


**F5**

Have you received any professional advice regarding the establishment of the business?

Yes     No

If Yes, please provide details of the advice and the outcome.


**F6**

Will your business require any consents under the Resource Management Act or the Overseas Investment Act?

Yes     No

If Yes, please provide details.


**F7**

Do you have any family members or associates who are currently operating similar businesses in NZ?

Yes     No

If Yes, please provide details of this business.

# Section G Declaration

This part must be signed by the principal applicant, partner and dependent children aged 17 years and over. Make sure you understand the declarations below before you sign them.

## Important

I understand that if I make any false statements, or provide any false or misleading information, or have changed or altered this form in any way, my application may be declined, or my visa or permit may later be revoked, and that I may also be committing an offence and liable to prosecution.

I understand that I am required to inform Immigration New Zealand (INZ) about any relevant changes to my circumstances that occur after I lodge this application.

I understand the notes and questions in this form and I declare the information given about myself, partner and any children is true and complete.

I declare that there are no matters or warrants outstanding, or investigations of any kind, which could have any current or future effect on the assessment of my good character or the good character of any other persons included in this application.

I authorise INZ to make any enquiries it deems necessary in respect of the information provided on this form and to share information about me with other government agencies (including overseas agencies) to the extent necessary to make decisions about my immigration status. I also consent to any organisation providing relevant information to INZ about me.

I authorise INZ to provide information about my state of health and my immigration status to any health service agency.

I authorise any health service agency to provide information about my state of health to INZ.

I accept that any advice given to me by INZ before lodging this application was intended to assist me and acting on that does not mean that my application for a long-term business visa and permit will be approved.

I understand that if I have received immigration advice from an immigration adviser and if that immigration adviser is not licensed under the Immigration Advisers Licensing Act 2007 when they should be, INZ will return my application.

I understand that in order to work in certain occupations in New Zealand registration is required by law. I accept that the grant of a permit does not guarantee that registration will be granted.

I agree that information about my personal resources and the contents of this form may be provided to Work and Income (a service of the Ministry of Social Development) if I apply for an emergency benefit. I understand that I will need to give a copy of this declaration to Work and Income if I apply for an emergency benefit.

Should my application be approved I agree to participate in an evaluation of the Long Term Business Visa/ Permit Category for a period of up to five years after the approval of my application. I agree to inform INZ of any changes to my postal/contact address within five years from the date of approval for the purpose of participating in the aforementioned evaluation.

Signature of principal applicant

day	month	year

Signature of partner (if applicable)

day	month	year

Signature of parent or guardian if principal applicant is under 17 years of age

day	month	year

Signature of accompanying dependent children 17 years of age and over (if applicable)


day	month	year



# Section I Declaration By Person Assisting the Applicant to Complete this Form

This section must be completed and signed by the applicant's immigration adviser, or by any person who has assisted the applicant by providing immigration advice, explaining, translating, or filling in the form for the applicant. If the applicant does not have an immigration adviser, and no one helped the applicant to fill in this form, this section does not have to be completed.

If you are unlicensed when you should be licensed under the Immigration Advisers Licensing Act 2007, Immigration New Zealand will return your client's application. It is an offence to provide immigration advice without holding a licence.

For more information, go to the Immigration Advisers Authority website [www.iaa.govt.nz](http://www.iaa.govt.nz), or email [info@iaa.govt.nz](mailto:info@iaa.govt.nz), or write to them at PO Box 6222, Wellesley Street, Auckland 1141, New Zealand.

**Name and address of person assisting applicant.**

Same as address given at Question A11, or  as below.

Name (include company name if applicable) and address	Telephone (day)
	Telephone (night)
	Email (if any)
	Fax (if any)

I understand that after the applicant has signed this form it is an offence to change or add further information, change any documents attached to the form, or attach any further documents to the form.

I note that the maximum penalty for this offence is a fine of up to NZ\$100,000 and/or a term of imprisonment of up to seven years. However, if changes are needed, the person making the changes must state on the form what information or documents have been changed and give reasons for the changes.

I certify that the applicant asked me to help them complete this form and any additional forms. I certify that the applicant agreed that the information provided was correct before signing the declaration.

- I have assisted the applicant as an interpreter/translator
- I have assisted the applicant with filling in the form
- I have assisted the applicant in another way.

Please specify

- I have provided immigration advice (as defined in the Immigration Advisers Licensing Act 2007) and my details in **Section H. Immigration Adviser's Details** are correct.

Signature of person assisting

Date     
Day Month Year

## Advance Passenger Screening

- New Zealand has implemented a system designed to enhance the security of New Zealand's borders. You may be refused permission to board your flight to come to, or return to, New Zealand if:
  - you do not have an appropriate visa to enter New Zealand; or
  - your visa has expired; or
  - your visa has not been transferred to your current/new passport or the passport being used to enter New Zealand.
- To minimise any disruption to your travel plans please ensure your travel documents are up-to-date and that you have the appropriate and current visa.  
If you have any questions check [www.immigration.govt.nz](http://www.immigration.govt.nz)

# CHECKLIST – PLEASE COMPLETE

Please ensure you enclose the correct documents with your *Application for Long Term Business Visa and Permit* according to the table below. If you fail to provide any of these documents, your application may be returned.

If you Make sure you provide	Are a first-time LTBV applicant (“interim”)	Have held a work visa/permit under LTBV policy for less than three years and are applying for a further work visa/permit (“balance”)	Are applying for consent to change your business plan (“consent to a change”)	Have held a work visa/permit under LTBV policy for three years and are applying for a further work visa/permit (“renewal”)
Signed application form	X	X	X	X
Passport(s) or certificate(s) of identity	X	X		X
Two passport sized photographs	X	X		X
Application fee	X			X
Evidence of your relationship to your partner and any dependant children that are listed on your form and will be accompanying you	X	Please provide if you have not provided this evidence before		Please provide if you have not provided this evidence before
Evidence that you meet English language requirements	X	Please provide if you have not provided this evidence before		Please provide if you have not provided this evidence before
Completed <i>Medical and X-ray Certificate(s)</i>	X	Please provide if you have not provided this evidence before		X
Police certificate(s)	X			X
Business plan & supporting documents	X		X	X

## Privacy Act

The information about you and your family on this form is being collected so that your eligibility for a Long Term Business visa or permit can be properly determined and may also be used to contact you for research purposes or to advise you on immigration matters. This information may also be used to determine your entitlement to board a flight to come to or return to New Zealand. Your personal information will not be shared with airline check in agents, however a boarding message will be returned to the airline check in agent based on information you have supplied on this form.

The main recipient of the information is Immigration New Zealand, a service of the Department of Labour but it may also be shared with other government agencies (including overseas agencies) for the purpose of making decisions about your application, or where they are entitled to this information under applicable legislation.

The collection of the information is authorised by the Immigration Act 1987 and the Immigration Regulations made under that Act. The supply of the information is voluntary, but if you do not supply it then your application for a long term business visa or permit is likely to be declined.

You have the right to see the information about you held by the New Zealand Immigration Service and to ask for any of it to be corrected. The address of the New Zealand Immigration Service is PO Box 3705 Wellington. This is not where your application should be sent.

### Collection Details

- I wish to collect my documents when ready (Note – this option is not available to applicants in the Auckland region).
- Please return all documents to me by “secure” post at the address given.

# Fee Payment Details

I am paying (amount)  Currency  Application number

## Preferred methods of payment

Bank Cheque/Bank Draft  \*EFTPOS  Credit card\*\* or SWITCH

Note the EFTPOS option is not available if lodging application by mail.

SWITCH card issue number (in UK only)

Credit card (specify type) Mastercard  Visa

Name of cardholder  Card number  Expiry date

Signature of cardholder  day month year

**The following methods of payment can be used but are not recommended for the noted reasons**

- Personal Cheque Your application will be held for 10 working days to ensure the cheque has cleared before it will be processed
- Cash Cash should not be sent through the mail for security reasons

## Note:

- Money Orders are not an acceptable form of payment
- Please see our leaflet **Fees Guide** (INZ 1028). All current fees and specific payment instructions for offshore branches can be found on the INZ website at [www.immigration.govt.nz](http://www.immigration.govt.nz).

*To be removed and securely destroyed after credit card transaction is processed.*

\*\*Your CVC/CVV number is required if you are paying by electronic credit card and your application is being lodged at Immigration New Zealand's Bangkok branch or London branch, or the MFAT post in The Hague.

If your application will be lodged in one of these three branches, please provide your CVC/CVV number here

**Note:** Your CVC/CVV number is the three-digit number found on the back of your credit card next to the signature strip.





