OFFICE USE ONLY	Client no.:	Date received: / /	Application no.:

July 2026

INZ 1398

NEW ZEALAND IMMIGRATION

Business Investor Work Visa
Operating Stage

Confirmation of purchase and operation of nominated business

Please download a copy of this form from our website each time to ensure you get the current version.
www.immigration.govt.nz

When to use this form

Use this form if you hold a Business Investor work visa and have purchased and begun operating the New Zealand business you previously told us you would purchase.

You must purchase and begin operating that business, and provide satisfactory evidence to us within 9 months of your Business Investor work visa being granted. You must also continue to meet fit and proper person requirements.

If you do not meet these requirements your current Business Investor work visa expires 12 months from the date it was granted.

How to complete this form

Print clearly in English using CAPITAL LETTERS.

Provide the evidence required in Section H.

Provide copies of documents. Do not provide original documents.

If we require original documents, we will contact you.

If you have questions about completing the form:

- See our website **www.immigration.govt.nz/contactus**

Where to send this form?

Postal address

Immigration New Zealand
PO Box 76895
Manukau City
Auckland 2241
New Zealand

Courier address

Immigration New Zealand
DX Box: EP71514
20 Fairfax Avenue
Penrose
Auckland 1061
New Zealand

Immigration Advisers Licensing Act 2007

Under the Immigration Advisers Licensing Act 2007 it is an offence to provide immigration advice without being licensed or exempt. If your immigration adviser is not licensed when they should be, Immigration New Zealand may require that the submission be resubmitted in a manner acceptable to Immigration New Zealand or in some cases may refuse to/may not be able to consider this submission.

For more information and to view the register of licensed advisers, go to the Immigration Advisers Authority website **www.iaa.govt.nz** or email **info@iaa.govt.nz**. Lawyers provide immigration advice and are exempt from licensing under the Immigration Advisers Licensing Act.

For more information and to view the register of immigration lawyers, go to the New Zealand Law Society website **www.lawsociety.org.nz**

Section A Personal details

A1 Name as shown in passport

Family/last name:

Given/first name(s):

A2 Date of birth: DD / MM / YYYY

A3 Country of citizenship:

A4 Passport details:

Number:

Country of citizenship: Expiry date: DD / MM / YYYY

A5 Your New Zealand residential address:

Telephone (daytime): Telephone (evening):

Email:

A6 Name and address for communication about this submission.

☐ Same as address at A5, or ☐ as below

Name of contact person:

Organisation name (if applicable):

New Zealand Business Number (if applicable) *For help search:* **www.nzbn.govt.nz**

Telephone (daytime): Telephone (evening):

Email:

A7 Do you authorise the person stated at A6 to act on your behalf?

☐ Yes ☐ No

A8 Do you authorise all other licensed immigration advisers or persons exempt from licensing who work for the organisation named at A6 to act on your behalf?

☐ Yes *Note: the person identified at A6 will receive all communication from Immigration New Zealand.*

☐ No *Only the person indicated at A6 may act on your behalf.*

A9 Have you received immigration advice on this application?

ⓘ You can find a definition of immigration advice at **www.immigration.govt.nz/advice**

☐ Yes *Make sure that your immigration adviser completes Section F: Immigration adviser's details.*

☐ No

Section B Partner and/or dependent children personal details

Please provide the personal details of family members originally included in the Business Investor work visa application to ensure that we correctly capture all individuals whose visa should be valid for the balance of the four-year period in the event that the relevant requirements are met.

Continue on a separate piece of paper, if necessary. *If you require more space for your dependent children's information, please continue on INZ1395 Additional Dependents for a Business Investor Work Visa.*

Name of partner and/or dependent child *(Name as shown in passport)*

Family/last name: | Given/first name(s): | Date of birth: DD/MM/YYYY

Passport details

Number: | Country: | Expiry date: DD/MM/YYYY

Name of partner and/or dependent child *(Name as shown in passport)*

Family/last name: | Given/first name(s): | Date of birth: DD/MM/YYYY

Passport details

Number: | Country: | Expiry date: DD/MM/YYYY

Name of partner and/or dependent child *(Name as shown in passport)*

Family/last name: | Given/first name(s): | Date of birth: DD/MM/YYYY

Passport details

Number: | Country: | Expiry date: DD/MM/YYYY

Name of partner and/or dependent child *(Name as shown in passport)*

Family/last name: | Given/first name(s): | Date of birth: DD/MM/YYYY

Passport details

Number: | Country: | Expiry date: DD/MM/YYYY

Section C Fit and proper person requirements

C1 Since your original Business Investor work visa was granted, have all businesses you have significant influence over complied with all immigration, employment and taxation laws? *Significant influence includes, but is not limited to, control of management and administrative functions when acting as a director or senior manager.*

☐ Yes ☐ No *(provide details)*

C2 Since your original Business Investor work visa was granted, have you been investigated by the serious Fraud Office or the New Zealand Police for any offences arising in the course of, or resulting from, business dealings?

☐ Yes *(provide details)* ☐ No

C3 Since your original Business Investor work visa was granted, have you been involved in any business fraud or financial impropriety?

☐ Yes *(provide details)* ☐ No

Section D Purchase and operation of nominated business

D1 Have you purchased the business or the proportion of the business (either directly or through a New Zealand resident entity) that you nominated in your work visa application, or that was approved as a change to your nominated business?

☐ Yes ☐ No *(provide details)*

D2 How much did you purchase the business or proportion of the business for?

NZ$

D3 What date was the purchase of the business, or proportion of the business, finalised? DD / MM / YYYY

D4 What proportion of the business do you currently own?

Note: This may include ownership held directly or through a New Zealand resident entity

D5 Have you purchased a business using a NZ Resident Entity?

Note: a New Zealand resident entity: is incorporated in New Zealand; and has its head office in New Zealand; and has its centre of management in New Zealand; and has control, by company directors, exercised in New Zealand

☐ Yes *(provide details)* ☐ No

D6 Did you use the funds (and/or assets) you nominated in your work visa application (including any gifted funds or assets) to purchase the business?

☐ Yes ☐ No *(provide details)*

D7 Fill in the table listing each transfer, amount transferred and date of transfer:

Note: If you have funds and assets in New Zealand you must complete the table below outlining how the original funds were transferred to New Zealand. This includes funds or assets that were gifted to you and subsequently transferred for the purposes of purchasing the business.

Document identifier	*Name of transfer document*	*Amount ($) transferred*	*Date of transfer*
1	*Bank Transfer Reciept*	*5,000.00*	*15 / 11 / 25*
2	*Wire Transfer Confirmation Reciept*	*12,750.00*	*20 / 11 / 25*

Document identifier	Name of transfer document	Amount ($) transferred	Date of transfer
1			/ /
			/ /
			/ /
			/ /
			/ /
			/ /
			/ /
			/ /
			/ /
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			/ /
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			/ /

D8 Provide full details of the business you have purchased.

New Zealand Business Number (if applicable) | | | | | | | | | | | | | | | | *For help search:* **www.nzbn.govt.nz**

Legal name (at time of purchase):

Current Legal name (if different):

Trading name (at time of purchase):

Current Trading name (if different):

Physical address:

Postal address (if different than the physical address):

What is the Business Industry Classification (BIC) for the business

BIC code: | | | | | | | *For example: M697020*

BIC description:

For example: Veterinary hospital.
For help search ***www.businessdescription.co.nz***

Does the business operate under a franchise agreement?

☐ Yes ☐ No

D9 When did you start operating the business or proportion of the business? DD / MM / YYYY

☐ I have not yet begun operating the business *(provide details)*

D10 What is your role/position in the business?

D11 What are your duties and responsibilities in the business?

Note: You must be actively involved in the business.
Actively involved means participating in the day-to-day operations, decision making, and strategic planning of the business.

D12 Do you have occupational registration if it is required to work in or operate the business?

☐ Yes ☐ No *(provide details)* ☐ I do not require occupational registration

D13 Does the business employ at least five people in full time equivalent positions?

☐ Yes ☐ No *(provide details)*

Note: A full-time permanent position means a permanent role for at least 30 hours a week.

D14 Does the business employ any of your family members?

Note: Family members includes partner, parent, child, grandparent, grandchild, uncle, aunt, nephew, niece or adult sibling of any person included in the Business Investor work visa application.

☐ Yes *(provide details)*

☐ No

Section E Declaration by submitter

I have provided true and correct answers to the questions in this form.

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 submission may be refused, or I may become liable for deportation.

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, Immigration New Zealand may require that the submission be resubmitted in a manner acceptable to Immigration New Zealand or in some cases may refuse to/may not be able to consider this submission.

I authorise Immigration New Zealand to make any necessary enquiries about information on this form and/or accompanying documentation.

I authorise any agency whether in New Zealand or overseas, including but not limited to border or immigration agencies, education providers, financial institutions, foreign embassies, government authorities, healthcare providers, police or other law enforcement agencies, that holds information (including personal information) related to information on this form and/or accompanying documentation to disclose that information to Immigration New Zealand so that they can:

- make an immigration decision relevant to the information that I have provided.
- answer enquiries about my immigration status once the information provided has been considered.

I understand that the information provided in this form may also be anonymised and used for survey or research purposes.

☐ I have provided all the documents required by the checklist at Section H.

Signature of submitter: _____ Date: DD / MM / YYYY

Section F Immigration adviser's details

This section must be completed by the submitter's immigration adviser. If the submitter has authorised all advisers within an organisation to act on their behalf at A8, only the person named at A6 must complete this section.

F1 If you are a licensed adviser, please provide your licence details.

Licence type: ☐ full ☐ provisional ☐ limited. *List conditions specified in the register.*

Licence number: 2 0

F2 If you are exempt from licensing, tick one box below to show why you are exempt from licensing then go to to Section G: Declaration by person assisting the submitter.

☐ I provided immigration advice in an informal or family context only, and I did not provide the advice systematically or for a fee.

☐ I have provided immigration advice in the course of my work (employed or volunteer) and that work exempts me from the requirement to be licensed. Indicate the reason for your exemption below.

☐ Lawyer with current New Zealand practicing certificate ☐ Community Law Centre

☐ Citizens Advice Bureau ☐ New Zealand Member of Parliament or staff ☐ New Zealand public servant

☐ Foreign Diplomatic/Consular

See **www.immigration.govt.nz/adviserlicensing** for more information about who is exempt from licensing.

Section G Declaration by person assisting the submitter

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

Name and address of person assisting the submitter ☐ Same as name and address given at A6, or ☐ as below

Family/last name: Given/first name(s):

Organisation name (if applicable) and address:

New Zealand Business Number (if applicable): *For help search:* **www.nzbn.govt.nz**

Telephone: Email:

I understand that after the submitter has signed this form it is an offence for me to change or add further information or change or add any documents attached to the form, without making a statement identifying what information or material has been changed, added or attached and by whom. If I make these changes or additions, I must state on the form what they were, who made them and the reason they were made.

I understand 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.

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

☐ I have assisted the submitter as an interpreter/translator

☐ I have assisted the submitter with recording information on the form

☐ I have assisted the submitter in another way. *Specify*

☐ I have provided immigration advice (as defined in the Immigration Advisers Licensing Act 2007) and my details in Section F: Immigration advisers details are correct.

Signature of person assisting the submitter Date DD / MM / YYYY

About the information provided

Immigration New Zealand collects the information about you on this form to decide if you have purchased and begun operating your nominated business. We may also use the information to contact you for research purposes or to advise you on immigration matters.

Collecting the information is authorised by the Immigration Act 2009 and the Immigration Regulations made under that Act. You do not have to provide the information, but if you do not supply it then Immigration New Zealand may not be able to find that you meet the requirements to access the balance of the four-year period of your work visa and so your current visa may expire after 12 months from the date it was granted.

Deciding whether you are eligible to board a flight to New Zealand

The information we collect may also be used to determine whether you are allowed to board a flight to New Zealand.

We will not share your personal information with airline check-in agents; however, we will send a boarding message to the airline check-in agent based on the information you have provided in this form.

Immigration New Zealand may also share the information you have provided with other government agencies that are entitled to it by law, or with other agencies (as you have agreed in the declaration).

You are able to ask for the information we hold about you and have any of it corrected. The address of Immigration New Zealand is PO Box 1473, Wellington 6140, New Zealand. This is not where your form should be sent.

Other documents we may need or you may wish to send

We may ask for additional documents or information so that we can consider it with this submission. You may wish to send other documents or information so that we can consider it with this submission. Send photocopies only (not original documents), as these documents will not be returned to you. If we need to see an original document, we will ask you to produce it later.

Section H Request checklist

Office Use only	Information and documents you must supply	Check list
☐	I have completed the form.	☐
☐	I have attached passports or travel documents (original or certified).	☐
☐	I have attached evidence of professional or occupational registration, if required.	☐
☐	I have attached evidence that I have purchased the nominated business, for example a sale and purchase agreement and evidence of payment and receipt of the required amount.	☐
☐	I have attached evidence that the funds I used to purchase the business are the same as those I previously nominated (for example bank transfer records).	☐
☐	I have attached evidence of transferring the nominated funds to complete the purchase (for example bank transfer records).	☐
☐	I have attached evidence that I have begun operating the business (for example bank statements showing revenue and expenses and lease agreements).	☐
☐	I have attached evidence that the business employs at least 5 people in full time equivalent positions (for example employment records and evidence of wage payments).	☐

For more information

If you have questions about completing the form:

- see our website **www.immigration.govt.nz/contactus**
- telephone our call centre on 0508 558 855 (within New Zealand).

New Zealand Government
Te Kāwanatanga o Aotearoa