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

November 2025 INZ 1394



Business Investor Work Visa Application

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

When to use this form

Use this form if you want to apply for a Business Investor Work Visa, which allows you to invest in and be actively involved in operating an existing business in New Zealand.

How to complete this form

Print clearly in English using CAPITAL LETTERS.

When submitting your application ensure you provide:

- Passports or travel documents for each person included in the application. Certified copies of passports or travel documents are recommended.
- Information and documents set out in Section P Application Checklist. Copies of documents only, unless stated otherwise.

If we require original documents, we will contact you.

If you have guestions about completing the form:

• see our website www.immigration.govt.nz/contactus

Where to send this form

Postal address Courier address

Immigration New Zealand Immigration New Zealand

PO Box 76895 DX Box: EP71514
Manukau City 20 Fairfax Avenue

Auckland 2241 Penrose
New Zealand 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 will refuse to accept or will decline your application.

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



Se	ction A Principal applicant's personal details			
All p	rincipal applicants must complete the section.			
The are a	ch two colour passport-size photographs of yourself here. photographs must be less than six months old. Photos that Al enhanced or altered do not meet our standards. Using Al result in your visa application being declined. Write your full le on the back of both photographs. Name as shown in passport Family/last name:	4.5cm 3.5cm	4.5cm	3.5cm
	Given/first name(s):	▼		
A2	Preferred title: Mr Mrs Ms Miss Dr other Other names you are known by or have ever been known by:	(specify)		
A4	Gender: Male Female A5 Date of birth	IM / YYYY		
A6	Town/city of birth:			
	Country of birth:			
A 7	Passport details			
	Number:			
	Country:		Expiry date:	DD / MM / YYYY
A8	Other citizenships you hold:			
A9		arated Partr	ner/De facto wed	Divorced

Se	ction B Principal applicant contact details
All p	rincipal applicants must complete the section.
B 1	Current home address and telephone number:
	Telephone (daytime): Telephone (evening):
	Email:
B2	Address in your home country (if different from above).
	Address:
В3	Name and address for communication about this application.
	☐ Same as address at 🖪 , or 🗌 as below
	Name of contact person:
	Organisation name (if applicable) and address:
	New Zealand Business Number (if applicable)
	Email:
B4	If you have given the name and address of an agent at [83], do you authorise that agent to act on your behalf?
	☐ Yes ☐ No
B5	Do you authorise all other licensed immigration advisers or persons exempt from licensing who work for the
	organisation named at 🖪 to act on your behalf (if applicable)?
	Yes Note: the person identified at B ₃ will receive all communication from Immigration New Zealand.
	No Only the person indicated at B3 may act on my behalf.
B6	Have you received immigration advice on this application?
0	You can find a definition of immigration advice at www.immigration.govt.nz/advice.
	Yes Make sure that your immigration adviser completes Section N: Immigration adviser's details.
	∐No

Section C Principal applicant's family details

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.

Parents (biological and adoptive). If both parents are deceased, give details of legal guardians (if any) and/or grandparents.					
Full name	Gender (M/F)	Date of birth (DD/MM/YY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence	
		/ /			
		/ /			
		/ /			
		/ /			
		/ /			
		/ /			

Brothers and sisters (including half-, step- and adopted brothers and sisters).						
Full name	Gender (M/F)	Date of (DD/MN		Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence	
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			

Children (including biologica	Children (including biological, adopted and step-children, including those from previous marriages/relationships).					
Full name	Gender (M/F)	Date of (DD/MI		Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence	Does the person intend to migrate with you? (Y/N)
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			

Section D Partner's personal details

If you selected 'Married/in civil union', 'Partner' or 'Engaged' in question [A9], you must complete this section, whether or not your partner is travelling with you.

If included, attach two colour passport-size photographs of your partner here. The photographs must be less than six months old. Photos that are Al enhanced or altered do not meet our standards. Using Al may result in your visa application being declined. Write your partners full name on the back of both photographs.

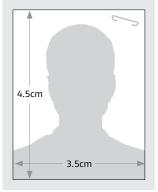
D1 Partner's name as shown in passport
Family/last name:

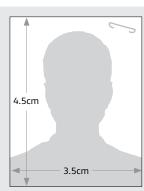
10	e your partiers full hairie on the back of both photographs.
	Partner's name as shown in passport
	Family/last name:
	Given/first name(s):

Is your partner included in this application?

Yes You must provide evidence of your relationship.

☐ No





D2	Partner's preferred title: Mr Mrs Ms Miss Dr Other (specify)
D3	Other names your partner is known by or has ever been known by:
D4	Partner's gender: Male Female D5 Date of birth: DD / MM / YYYY
D6	Partner's town/city of birth:
	Partner's country of birth:
D7	Other citizenships your partner holds:
D8	Passports details
	Number:
	Country: Expiry date: DD / MM / YYYY

Section E Partner's family details

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

Parents (biological and adoptive). If both par	ents are deceased, giv	ve details of legal guardians (if a	ny) and/or grandparents.
Full name	Gender (M/F)	Date of birth (DD/MM/YY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence
		/ /		
		/ /		
		/ /		
		/ /		

Brothers and sisters (including half-, step- and adopted brothers and sisters).						
Full name	Gender (M/F)	Date of birth (DD/MM/YY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence		
		/ /				
		/ /				
		/ /				
		/ /				

Children (including biologica	Children (including biological, adopted and step-children, including those from previous marriages/relationships).						
Full name	Gender (M/F)	Date of birth (DD/MM/YY)	Partnership status (e.g. single, married, partner/de facto, etc.)	Country of residence	Does the person intend to migrate with you? (Y/N)		
		/ /					
		/ /					
		/ /					
		/ /					

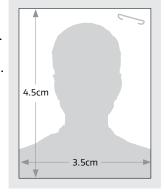
Section F Dependent children

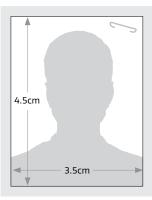
Supply the following details for each dependent child included in this application. Please ensure that you complete \mathbb{F}_{37} (at the end of this section). If you have no dependent children included in this application, go to Section G Character requirements.

Dependent child one

Attach two colour passport-size photographs of your dependent child here. The photographs must be less than six months old. Photos that are Al enhanced or altered do not meet our standards. Using AI may result in your visa application being declined. Write your dependent child's full name on the back of both photographs.

	'	•	_
F1	Child's name as shown in passport		
	Family/last name:		
	Given/first name(s):		





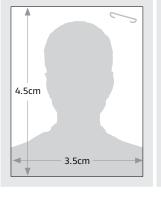
F2	Child's gender: Male Female F3 Child's date of birth: DD / MM / YYYY
F4	Child's country of birth:
F 5	Child's passport details
	Number: Country: Expiry date: DD / MM / YYYY
F6	Other citizenships child holds:
F 7	Partnership status: Single Separated Partner/De facto Divorced Married/in civil union Engaged Widowed
F8	Does this child have children of his/her own?
F9	Does your child require a student or visitor visa? Student Visitor
Dep	endent child two
child Pho Usin	ch two colour passport-size photographs of your dependent di here. The photographs must be less than six months old. tos that are Al enhanced or altered do not meet our standards. In your visa application being declined. Write or dependent child's full name on the back of both photographs. Child's name as shown in passport Family/last name: Given/first name(s): 3.5cm 3.5cm
F11	Child's gender: Male Female Fize Child's date of birth: DD / MM / YYYY
F13	Child's country of birth:
F14	Child's passport details
	Number: Country: Expiry date: DD / MM / YYYY
F15	Other citizenships child holds:
F16	Partnership status: Single Separated Partner/De facto Divorced Married/in civil union Engaged Widowed
F17	Does this child have children of his/her own?
F18	Does your child require a student or visitor visa? Student Visitor

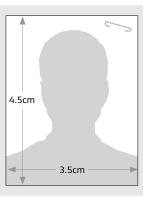
Dependent child three

Attach two colour passport-size photographs of your dependent child here. The photographs must be less than six months old. Photos that are Al enhanced or altered do not meet our standards. Using AI may result in your visa application being declined. Write your dependent child's full name on the back of both photographs. 4.5cm 4.5cm Child's name as shown in passport Family/last name: 3 5cm 3 5cm Given/first name(s): F21 Child's date of birth: | DD | / MM | / YYYY Child's gender: Male Female F22 Child's country of birth: Child's passport details Country: Expiry date: DD // MM // Number: Other citizenships child holds: Single Separated Partner/De facto Divorced Partnership status: Married/in civil union Engaged ☐ Widowed Does this child have children of his/her own? Yes No Does your child require a student or visitor visa? Student Visitor Dependent child four

Attach two colour passport-size photographs of your dependent child here. The photographs must be less than six months old. Photos that are Al enhanced or altered do not meet our standards. Using AI may result in your visa application being declined. Write your dependent child's full name on the back of both photographs.

Child's name as shown in passport Family/last name: Given/first name(s):





F29	Child's gender: Male	Female	F30 Child's date of birth:	DD / MM / YYYY
F31	Child's country of birth:			
Fac	51.11.11.11.11.11.11.11.11.11.11.11.11.1			

32 Child's passport details

Expiry date: DD / MM / Country: Number:

Other citizenships child holds:

F34	Partnership status:	Single	Separated	☐ Partner/De facto	☐ Divorced
		☐ Married/in civil union	Engaged	☐ Widowed	
F35	Does this child have chil	dren of his/her own? Yes	□No		
F36	Does your child require	a student or visitor visa? 🗌 S	tudent Uvisitor		
	e details of any addition 1395), and attach it to t	al dependants on the form <i>A</i> his page.	dditional Dependen	ts for a Business Investor	Work Visa
F37	Are you separated or div	vorced from the parent of any this application?	of the above childre	n or is the parent of any o	f the above
	Yes You must provide evi	idence that you have been granted th	e right to bring this child	to New Zealand.	
Se	ction G Character	requirements			
The		ply to every person included	in this application	17 years of age and over.	
G1		ding all countries of citizenshi nce the age of 17 and attach po ne country.			
	Name of applicant or fai	mily member:			
	Name of country:				
	Date of arrival: DD / MM	Date of c	departure: od / MM	/	
	Name of applicant or fa	mily member:			
	Name of country:				
	Date of arrival: DDD / MM	Date of c	departure: od / MM	/	
	Name of applicant or fai	mily member:			
	Name of country:				
	Date of arrival: DD / MM	Date of c	departure: DD / MM	/	
	Name of applicant or fai	mily member:			
	Name of country:				
	Date of arrival: DD / MM	Date of c	departure: DD / MM	/	
G2		luded in this application, been this includes any conviction(s) outside			
G 3	Are you, or is anyone inc	cluded in this application, curr	ently:		
	under investigationwanted for questioninfacing charges	Yes No Yes No Yes No			
	for any offence in any co	ountry?			

G4	Do you, or does anyone included in this application, currently have an outstanding arrest warrant in any country? \square Yes \square No				
G 5	Have you, or has anyone included in this application, ever been: • excluded				
	 refused entry				
	from any country, excluding New Zealand?				
G6	Have you, or has anyone included in this application, ever been a member of, or adhered to, any terrorist organisation? \square Yes \square No				
G 7	Have you, or has anyone included in this application, at any time in a public speech or public comments, or public broadcast, or in publicly distributing or publishing a document argued that one race or colour is inherently inferior or superior to another race or colour; or used language intended to encourage hostility or ill will against any person or group of persons on the basis of colour, race, or ethnic or national origins of that person or group? \square Yes \square No				
G8	Have you, or has anyone included in this application, been (or currently are) a member of an organisation or group which had objectives or principles based on hostility against people or groups on the basis of colour, race or ethnic/national origins; or an assumption that persons of a particular race or colour are inherently inferior or superior to other races or colours? Yes No				
Have you, or has anyone included in this application, had (or currently have) an association with, memb of, or involvement with, any government, regime, group or agency that has advocated or committed was crimes against humanity and/or other gross human rights abuses? Yes No					
	If you have answered yes to any of the questions above give full details. This includes full details of any charges convictions and the sentence or penalty imposed. Continue on a separate piece of paper if necessary.				

Se	ction H Fit and proper person requiremer	nts				
H1	Have all businesses you have had significant influence over complied with all immigration, employment and taxation laws in any country?					
0	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)					
H2	Have you ever 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					
Н3	Have you ever been involved in business fraud or fin Yes (provide details) No	nancial impropriety in any country?				
Se	ction l Health requirements					
	Chest X-ray Certificate (INZ 1096) that were completed and dated by a medical practitioner within the last 36 months with another Immigration New Zealand application? Yes Provide details in the table below No A General Medical Certificate (INZ 1007) and Chest X-ray Certificate (INZ 1096) must be provided for every person included in this application. Pregnant women and children under 11 are not required to have an chest X-ray, unless a special report is required. Go to					
	Full name	Type of application	Date application was lodged			
	1.		/ /			
	2.		/ /			
	3.		/ /			
	4.		/ /			
	5.		/ /			
	6.		/ /			
	If everyone included in the application has submitted a medical certificate and chest X-ray certificate in the last 36 months you do not need to provide further certificates now, unless:					
	 the health status of any applicant has deteriorated since their previous medical certificate was issued, or any applicant has spent six consecutive months in a place that is not listed as having a low incidence of tuberculosis since their previous chest X-ray, in which case a new chest X-ray certificate is required. 					
	If not everyone included in the application has subr by a medical practitioner within the last 36 months					
12	Do you, or does anyone included in this application,	have tuberculosis (TB)? Yes No				

Do you, or does anyone included in this application have any medical condition that requires, or may require, one of the following during your stay in New Zealand?				
• Renal dialysis Yes No				
• Hospital care Yes No				
• Residential care [*]				
*Residential care is defined as in-patient care for people with psychiatric, sensory or intellectual disabilities or live-in facilities for the aged.				
Do you have a dependent child included in this application who requires special education services?				
☐ Yes ☐ No				
If you have answered Yes to any of the questions in 12 to 14, please provide further details:				
Are you or any person included in this application pregnant?				
Yes Date the pregnant applicant is due to give birth: $ DD _f MM _f _{YYYY}$				
□ No				
Tick the option that applies to you: Is a physician submitting your medical and/or chest X-ray certificates				
to Immigration New Zealand on your behalf?				
Yes Has your physician supplied you with an eMedical Reference Code (NZER)?				
Yes Enter your eMedical Reference Code here:				
No Enter the name of the clinic that is submitting your health information:				
No If the physician has returned the medical and/or chest X-ray certificates to you, then you will need to submit these with your visa application				

Section J	Principal applicant's English language requirements
Ji Do you	meet the minimum standard of English? (select one only).
B ₂ F of 3	English Language test with the required score (IELTS overall band score of 5.0 or more, Cambridge English First (FCE) or B2 First for Schools (FCE for Schools) overall score of 154 or more, TOEFL iBT overall score 5 or more, PTE Academic overall score of 36 or more, OET grade C or higher in all four skills (Listening, ding, Writing and Speaking)).
Note	: English language test results must be no more than 2 years old at the time you apply.
	enship of Canada, the Republic of Ireland, the United Kingdom or the United States of America 5 years in work or education in one or more of those countries or Australia or New Zealand.
Can	cognized qualification comparable to a New Zealand level 7 bachelor's degree and gained in Australia, ada, New Zealand, the Republic of Ireland, the United Kingdom or the United States of America as a result tudy undertaken for at least two academic years in one or more of those countries.
Aus	cognized qualification comparable to a New Zealand qualification at level 8 or above and gained in tralia, Canada, New Zealand, the Republic of Ireland, the United Kingdom or the United States of America result of study undertaken for at least one academic year in one or more of those countries.
Asse or pr	: If you provide a qualification to meet English language requirements, you must provide either an International Qualification ssment from NZQA, or the qualification must be on the List of Qualifications Exempt from Assessment (LQEA) or you hold full ovisional registration by a New Zealand organisation and that registration involves an assessment of your overseas qualification in the LQEA.
relevar	nave completed an English language test, please confirm which test you have taken, and provide the at test details that will allow verification of your test results (e.g. test report form number, candidate/test D, any other unique number assigned to you (e.g. secret number, registration number).
Which	English language test did you take?
What v	vas the date you sat your test?
English	language test score/s:

Section K Principal applicant's business experience

К1	

Do you have a minimum of three years business experience?

Note: You must have acceptable business experience.

 Paid self-employment in a lawful business enterprise or charity or non-governmental organisation operating in a commercial environment that had at least 5 full-time employees and an annual turn-over of NZD\$1 million. Paid senior management level experience in a lawful business enterprise or charity or non-governmental organisation operating in a commercial environment that had least 5 full-time employees and an annual turn-over of at least NZD\$5 million. You must have held the appropriate immigration or citizenship status that legally allowed you to undertake the role in which you gained this experience. 							
Yes No Complete the table bel	Yes No Complete the table below by outlining your business experience:						
Duration (months/years)	Entity Name and Type	Type (i.e. self- employment or senior management experience)	Role/position held	Key activities and responsibilities			
Have you been involved in bankruptcy or business failure within the five years preceding this application? Yes No If yes, provide details (including dates):							

What is your total capital investment funds (nominated funds and/or assets)?

Note: You must have at least NZD\$1 million in nominated funds and/or assets to purchase your nominated business or proposed proportion of ownership.

Total amount of capital investment funds (nominated funds and/or assets) in NZD\$:

Provide the following details for your capital investment funds (nominated funds and/or assets):

Funds/asset type (eg bank deposits)	Owner(s)	Location (eg xxxx bank)	Net value	Value (NZD\$)
Total				

ussets) held in New Zeala		
ssets) held in New 7eala		
ssets) held in New 7eala		
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ssets) held in New 7eala		
	nd?	
low outlining how the original i		erred
Amount (\$) transferred	Date of tran	sfer
	/ /	/
	/ /	/
	/	/
	/ /	/
	/ /	/
	/ /	/
	/ /	/
	/ /	/
	/ /	/
	/ /	/
r	Amount (\$) transferred r assets) gifted to you?	r assets) gifted to you?

List below the documents you have provided to support the information outlined in this section regarding your capital investment funds. Continue on a separate sheet of paper if necessary. Example:

Document identifier	Document details	Requirement (question above)
1	Valuation of shares	L2 – Capital Investment Funds
2	Employment contract and salary slips	L4 – Funds earned

Document identifier	Document details	Requirement (question above)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Reserve Funds

What is your total reserve funds?

You must have at least NZD\$500,000 in reserve funds, additional to the capital investment funds you will use to purchase the nominated business.

Total amount of reserve funds (in NZD\$):

L8 Provide the following details for your reserve funds:

Funds/asset type (eg bank deposits)	Owner(s)	Location (eg xxxx bank)	Net value	Value (NZD\$)
Total				

List below the documents you have provided to support the information you have outlined in this section regarding your reserve funds. Continue on a separate sheet of paper if necessary.

Example:

Document identifier	Document details Requirement (questi	
1	Term deposit certificate	L7 - Reserve Funds

Document identifier	Document details	Requirement (question above)
1		
2		
3		
4		
5		
6		
7		

8	
9	
10	

Section M Declaration

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 application may be declined, or I may become liable for deportation.

I will inform Immigration New Zealand of any relevant fact or change of circumstances (including a change in my employment or partnership status) that may (i) affect the decision on my application for a visa, or (ii) affect the decision to grant entry permission based on the visa for which I am applying.

I agree to leave New Zealand before my visa expires. If I remain in New Zealand after my visa has expired, I may be deported by Immigration New Zealand.

I agree that if I am not entitled to free health care in New Zealand, I will pay for any health care or medical assistance I may require in New Zealand.

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 will refuse to accept or decline my application.

I understand that Immigration New Zealand may provide information about my entitlement to work to potential employers including via the online VisaView system. If I undertake a course of study while in New Zealand, I authorise Immigration New Zealand to provide information about my immigration status to my education provider, including via VisaView.

I authorise Immigration New Zealand to provide information about my health and my immigration status to any health service agency. I authorise any health service agency to provide information about my health to Immigration New Zealand.

I understand that:

- an immigration officer will assess the nominated business solely to determine whether the Business Investor Work Visa Instructions are met; and
- the granting of any visa based on that nominated business is not an endorsement of the business or guarantee of its success by the New Zealand Government; and
- if I do proceed to purchase the nominated business or a proportion of ownership in the nominated business, it is entirely at my own risk.

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 application form and/or accompanying documentation to disclose that information to Immigration New Zealand so that they can:

- make a decision on this application
- answer enquiries about my immigration status once my application has been decided.

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

purposes.	
\square I have provided all the documents required by the Application checklist at Section P.	
Signature of principal applicant:	Date: DD / MM / YYYY
Signature of partner (if applicable):	Date: DD / MM / YYYY

Sign	atures of accompanying dependent children over 18 years of age (if applicable):	
		Date: DD / MM / YYYY
		Date: DD / MM / YYYY
		Date: DD / MM / YYYY
		Date: DD / MM / YYYY
		Date: DD / MM / YYYY
		Date: DD / MM / YYYY
Se	ction N Immigration adviser's details	
With N1	In an organisation to act on their behalf at Bs, only the person named at Bs must con If you are a licensed adviser, please provide your licence details. Licence type: full provisional limited. List conditions specified in the register.	nplete this section.
	Licence number: 2 0	
N2	If you are exempt from licensing, tick one box below to show why you are exempt from licensing. Section O: Declaration by person assisting the applicant.	censing then go to
	☐ I provided immigration advice in an informal or family context only, and I did not provisystematically or for a fee.	de the advice
	\square I have provided immigration advice in the course of my work (employed or volunteer) a 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 Foreign Diplomatic/Consular	aland public servant
	See www.immigration.govt.nz/adviserlicensing for more information about who is exe	mpt from licensing.

20 – Business Investor Work Visa Application – November 2025

Section 0 Declaration by person assisting			
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 recording information on 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.			
Name and address of person assisting the applicant \square Same as name and address given at \square , or \square 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 applicant 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 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			
$\ \square$ I have assisted the applicant with recording information on the form			
I have assisted the applicant in another way. Specify			

☐ I have provided immigration advice (as defined in the Immigration Advisers Licensing Act 2007) and my details

Signature of person assisting the applicant:

in Section N: Immigration advisers details are correct.

About the information provided

Immigration New Zealand collects the information about you on this form to decide whether you are eligible for a Business Investor work visa. 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, we are likely to decline your application.

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 application 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 application. You may wish to send other documents or information so that we can consider it with this application. 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.

Se	ction P Application checklist	
Office Use only	Information and documents you must supply	Check list
	I have completed the application form.	
	Each person included in the application has signed the form or if a child is included (under the age of 18), the form has been signed on their behalf.	
	I have provided the application fee and immigration levy.	
	I have attached passports or travel documents (original or certified) for each person included in the application.	
	l have attached two recent passport-size photographs of each person included in the application.	
	I have attached medical certificates and chest X-ray certificates for each person included in the application, if required.	
	I have attached police certificate(s) (less than six months old) for each person included in the application, where required.	
	I have attached evidence of my relationship to my partner and dependent children that are listed on my application and who will be accompanying me to New Zealand.	
	I have attached evidence of my English language.	
	I have attached evidence of my business experience.	
	I have attached evidence of capital investment funds (nominated funds and/or assets) to be used to purchase my nominated business. Valuations of assets must be no older than three months old	
	I have attached evidence of my reserve funds. Valuations of assets must be no older than three months old	. 🗆
	I have attached evidence that my partner supports the use of capital investment funds (nominated funds and/or assets) and/or reserve funds, if required.	
	I have attached the Business Proposal form (INZ 1393) and the evidence required in that form.	
Plea	turning your documents se return documents to me by secure post at the ess given at:	2

B3

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).

Section Q

Paying your application fee and immigration levy

To find out how much to pay, payment methods, where to send your application, and how long a decision may take, see www.immigration.govt.nz/fees

Your application fee and immigration levy
Amount you are paying:
Amount
Currency (e.g. NZD, USD, RMB)
Application number (office use only)
Credit/debit card details
☐ Mastercard ☐ Visa
Name of cardholder
Card number
Note: Your CVC/CVV number is the three-digit number found on the signature strip on the back of your credit/debit card.
Expiry date DD / MM / YYYY
Signature of cardholder
Date DD



