June 2024 INZ 1172



# Temporary Retirement Category Visitor Visa Application

for a temporary stay in New Zealand

## Use the guide to help you complete the application form

Please read the *Temporary Retirement Category Visitor Visa Guide (INZ 1173)* **before** you complete this application form. The guide will help you decide which visa you should apply for and contains helpful information about how to complete the application form. The guide also gives detailed information about the evidence and documents you need to provide.

When you have completed the form, please use the checklist at the end to make sure you have sent all the documents and information we need.

We will process your application only when we receive **all** the information and documents we need. If you do not send all the required information, we will return your application.

Dependent children cannot be included in this application.

#### **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 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** or email **info@iaa.govt.nz**.

Lawyers provide immigration advice and are exempt from licensing under the Immigration Advisers Licensing Act 2007. For more information and to view the register of immigration lawyers, go to the New Zealand Law Society website www.lawsociety.org.nz.

When filling in this form, please print clearly in English using CAPITAL LETTERS.

#### Section A

# Principal applicant's personal details

#### All principal applicants must complete this section.

for more information about the questions in this section see 'Completing Section A: Principal applicant's personal details' in the *Temporary Retirement Category Visitor Visa Guide*.

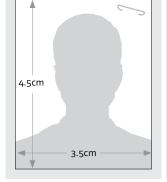
Attach **two** passport-size photographs of yourself here. The photographs must be less than six months old. Write your full name on the back of each of the photographs.

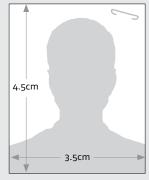
**A**1

Name as shown in passport

Family/last name

Given/first name(s)





Whei	When filling in this form, please write clearly using CAPITAL LETTERS.		
A2	A2 Preferred title Mr Mrs Ms Miss Dr Other (please spec	cify)	
<b>A3</b>	Other names you are known by or have ever been known by		
<b>A</b> 4	A4 Your name in ethnic script		
<b>A</b> 5	A5 Gender  Male Female  A6 Date of birth DIDIMINITY	YIYIY	
A7	A7 Town/city of birth		
	Country of birth		
<b>A8</b>	A8 Passport details		
	Number		
	Country	Expiry date	
<b>A9</b>			
A10			
A11	Partnership status	never in civil union	☐ Partner/De facto
Se	Section B Contact details		
All p	All principal applicants must complete this section.		
<b>B</b> 1	Your residential address and telephone number in your home country	,	
	Address		
	Telephone (daytime) Telephone	(evening)	
	Fax   Email		

Address		
Felephone (daytime)	Telephone (evening)	
Fax	Email	
our New Zealand residential ad	dress and telephone number (if you are already in New Zealand)	
Address		
Telephone (daytime)	Telephone (evening)	
	Telephone (evening)	
Telephone (daytime) Fax		

В3	Name and address for communication about this application.
	Same as address at B1, or Same as address at B2, or as below
	Name of contact person
	Organisation name (if applicable) and address
	New Zealand Business Number (if applicable)    For help search: www.nzbn.govt.nz
	Telephone (daytime) Telephone (evening)
	Fax Email
B4	Do you authorise the person stated at B 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 [83] to act on your behalf (if applicable)?
	Yes Note: the person identified at B3 will receive all communication from Immigration New Zealand.
	No Only the person indicated at B3 may act on my behalf.
В6	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 J: Immigration adviser's details. Go to B6  No Go to B7
В8	Names and addresses of any friends, relatives, or contacts you have in New Zealand (if applicable)
	Name
	Address
	Relationship
	Name
	Address
	Relationship

# Section C Partner's personal details

All principal applicants who have ticked 'Married/in civil union', 'Partner' or 'Engaged' at All must complete this section with their partner's personal details, whether or not the partner is included in this application. Attach a photograph of your partner only if they are included in this application.

**f** For more information about the questions in this section see 'Completing Section C: Partner's personal details' in the *Temporary Retirement Category Visitor Visa Guide*.

If applicable, attach two passport-size photographs of your partner here. The photographs must be less than six months old. Write your partner's full name on the back of the photographs. Partner's name as shown in passport 4.5cm 4.5cm Family/last name Given/first name(s) 3.5cm 3.5cm Partner's preferred title Mr Mrs Ms Miss Dr Other (please specify) Other names your partner is known by or has ever been known by Partner's name in ethnic script C6 Partner's date of birth DEDIMENTY YEAR Partner's gender Male Female Partner's town/city of birth Partner's country of birth Partner's passport details Number Expiry date Country Partner's country of citizenship Other citizenships your partner holds Is your partner included in this application? Yes You must provide evidence of you living together in a genuine and stable relationship. See Completing Section C: Partner's personal details in the Temporary Retirement Category Visitor Visa Guide. □No

Se	ection D Character		
You	and your partner (if included in thi	s application) must complete this section.	
0	For more information about the questions in Visitor Visa Guide.	this section see 'Completing Section D: Character' in the <i>Temporary Retirement Category</i>	
D1	, , ,	application, been convicted at any time of any offence, including any driving conviction(s) outside of New Zealand subsequently cleared or wiped by 'clean slate' legislation.	
Are you, or is anyone included in this application, currently:			
	<ul> <li>under investigation</li> </ul>	☐ Yes ☐ No	
	<ul> <li>wanted for questioning</li> </ul>	☐ Yes ☐ No	
	• facing charges	☐ Yes ☐ No	
	for any offence in any country?		
D3	Have you, or has anyone included in	this application, ever been:	
	• excluded	☐ Yes ☐ No	
	refused entry	☐ Yes ☐ No	
	<ul> <li>removed or deported</li> </ul>	☐ Yes ☐ No	
	from any country, excluding New Ze	aland?	
D4	Have you, or has anyone included in or reside in any country, excluding N	this application, ever been refused a visa/permit to visit, work, study lew Zealand?	
D5	Have you, or has anyone included in any terrorist organisation?	this application, ever been a member of, or adhered to,	
D6	, , , , , , , , , , , , , , , , , , , ,	this application, had (or currently have) an association with, membership ment, regime, group or agency that has advocated or committed war crimes, er gross human rights abuses?	
		the questions above give full details. This includes full details of any charges, nalty imposed. Continue on a separate piece of paper if necessary.	
D7		s for you and your partner (if included in this application) from all countries s or more from the age of 17 years and from your country(ies) of citizenship?	
	Yes No	5 5. more from the age of 17 years and from your country(les) of chizensing:	
	_ :		

8	List all countries (including all countries of citizenship) that you and/or your partner have lived in for five years
	or more from the age of 17 years. Include countries where your stay has been broken by short departures.

Applicant name	Country	Date of arrival (DD/MM/YY)	Date of departure (DD/MM/YY)
		/ /	/ /
		/ /	/ /
		/ /	/ /
		/ /	/ /
		/ /	/ /
		/ /	/ /
		/ /	/ /
		/ /	/ /
		/ /	/ /

				/ /	/ /
					'
ion E Addition	onal details				
lete this section i	for you and your partr	ier (if included in t	his application).		
o you or your par	tner (if included) in this	application have a	national identity	number, or ot	her unique ident
Yes <i>Provide details</i>	, <u>-</u>				
	Name of appli	cant		National identity	number/Unique ident
l					
2.					
3.					
4.					
_					
5.					
5. 6.					
6.	artner (if included in th	is application) com	pleted military se	ervice in any co	ountry?
6. lave you or your p ] Yes <i>Please provide</i>	e information about your/the	ir military service includ	ling the dates of your,	-	•
ave you or your p Yes Please provide and rank, the i		ir military service includ	ling the dates of your,	-	•
6. lave you or your p ] Yes <i>Please provide</i>	e information about your/the	ir military service includ	ling the dates of your,	-	•
ave you or your p Yes Please provide and rank, the i	e information about your/the	ir military service includ	ling the dates of your,	their military serv	•
6. lave you or your p Yes Please provide and rank, the i	e information about your/the unit or units that you/they se	ir military service includ erved in, and your/their I	ling the dates of your, role within each unit.	their military serv	rice, your/their positi
6. lave you or your p Yes Please provide and rank, the i	e information about your/the unit or units that you/they se	ir military service includ erved in, and your/their I	ling the dates of your, role within each unit.	their military serv	rice, your/their positi
6. lave you or your p Yes Please provide and rank, the i	e information about your/the unit or units that you/they se	ir military service includ erved in, and your/their I	ling the dates of your, role within each unit.	their military serv	rice, your/their positi
6. lave you or your p Yes Please provide and rank, the i	e information about your/the unit or units that you/they se	ir military service includ erved in, and your/their I	ling the dates of your, role within each unit.	their military serv	rice, your/their positi
6. lave you or your p Yes Please provide and rank, the i	e information about your/the unit or units that you/they se	ir military service includ erved in, and your/their I	ling the dates of your, role within each unit.	their military serv	rice, your/their positi
6. lave you or your p Yes Please provide and rank, the i	e information about your/the unit or units that you/they se	ir military service includ erved in, and your/their I	ling the dates of your, role within each unit.	their military serv	rice, your/their positi
6. lave you or your p Yes Please provide and rank, the i	e information about your/the unit or units that you/they se	ir military service includ erved in, and your/their I	ling the dates of your, role within each unit.	their military serv	rice, your/their positi

Have	e you or your partner (if included in this application) been associated with any intelligence agency or graw enforcement agency?  es Describe how you/they were involved \Box\ No  e you or your partner (if included in this application) been associated with any group or organisation that used or promoted violence to further their aims?  es Describe how you/they were involved \Box\ No
or la	es Describe how you/they were involved No  eyou or your partner (if included in this application) been associated with any group or organisation that used or promoted violence to further their aims?
Or la	es Describe how you/they were involved No  eyou or your partner (if included in this application) been associated with any group or organisation that used or promoted violence to further their aims?
Have has	e you or your partner (if included in this application) been associated with any group or organisation tha used or promoted violence to further their aims?
has	used or promoted violence to further their aims?
has —	used or promoted violence to further their aims?
<u></u> Y∙	es Describe how you/they were involved No
ctio	n F Health
rinci	pal applicants must complete this section.
For n	nore information about this question, see 'Completing Section F: Health' in the Temporary Retirement Category Visitor Visa Guide
Do y	ou or your partner (if included in this application) have tuberculosis (TB)?
□ Ye	es Provide details
□N	lo
	ou or your partner (if included in this application) have any medical condition that requires, or may requi of the following during your stay in New Zealand?
• Re	enal dialysis
• Hc	ospital care
• Re	esidential care
	dential care is defined as in-patient care for people with psychiatric, sensory or intellectual disabilities ve-in facilities for the aged.
lf yo	ou have answered <b>Yes</b> to any of the questions in [F2], provide details

Are you 66 years of age or over?  $\square$  Yes  $\square$  No

Se	ction H Investment funds				
	must have investment funds of at leas me of NZ\$60,000.	st NZ\$750,000 maintenance funds of	NZ\$500,000 and	l an annual	
0	For more information about the questions in this section, see 'Completing Section H: Investment funds' in the <i>Temporary Retirement Category Visitor Visa Guide</i> .				
H1	Do you have NZ\$750,000 to invest in New Zealand for two years? Yes No				
H2	What kind of investment do you propos	se undertaking? (Indicative proposal.)			
НЗ	Can you demonstrate ownership of mai in [hi]?	ntenance funds of NZ\$500,000 over a	nd above the nomi	inated funds	
H4	Can you demonstrate that you have an annual income of at least NZ\$60,000?  Yes No				
H5	Who owns the funds you have nominated in [H]?  You You and your partner				
Н6	Show the type and location of the fund funds, settlement funds and your annu-		e purposes of the i	investment	
	Funds/Assets type (eg bank deposits)	Location (eg XXXX Bank)	Net value	Value (NZ\$)	

TOTAL:

	cessary.		
	vour oproines for at !	st the last five	years and the sources of this income. Continue on a separate
Please list sheet of pa	your earnings for at lea aper if necessary.	st the last live	
Please list sheet of pa	your earnings for at lea aper if necessary.  Income earned (after tax)	\$NZ equivalent	Source of income
sheet of pa	aper if necessary.		
sheet of pa	aper if necessary.		

H9	Were any of the funds and/or assets you nominated at H6 gifted to you?
	Yes Explain how your donor earned or acquired these funds
	No Go to H10
Uro	
H10	List below the documents you have provided to support the claims you have made in this section.
	ction l English Language Translations
	more information about this section and acceptable evidence of funds, see 'Completing Section I: English language slations' in the <i>Visitor Visa Guide</i> .
	have provided English language translations for all supporting documents not already in English.
Se	ction J Declaration by applicant
con	principal applicant and any partner included in this application must agree to the following terms and ditions and sign the declaration space below. Ensure you understand the declarations below before you and agree to them.
_	derstand that if I make any false statements or provide any false or misleading information, or have changed
or al	tered this form in any material way after it has been signed, my application for a visitor visa may be declined, I may lose any right of appeal of the decision to decline the application. I may become liable for deportation. y also be committing an offence and I may be imprisoned.
	ve provided true and correct answers to the questions in this form.
	I inform Immigration New Zealand of any relevant fact or change of circumstances that may (i) affect the decision on application for a visa, or (ii) affect the decision to grant entry permission based on the visa for which I am applying.

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 Immigration New Zealand to make any enquiries it deems necessary regarding the information provided on this form and/or accompanying documentation, and to share this information with other government agencies

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

(including overseas agencies) to the extent necessary to make decisions about my immigration status.

form and/or accompanying documentation to disclose that information to Immigration New Zealand.

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 accept that any advice given to me by Immigration New Zealand before submitting this application was intended to assist me, and acting on that does not mean that any later application for residence will be granted.

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 return my application.

Should my application be approved, I understand that I and my partner (if applicable) must hold acceptable travel and/or health insurance and maintain such insurance for the duration of the two-year visa.

I declare that the funds I have nominated in this application were lawfully earned or acquired and that I will transfer them to New Zealand and invest them according to the requirements of the Temporary Retirement Category.

Signature of principal applicant Signature of partner (if applicable) Section K | Immigration adviser's details This section must be completed by the applicant's immigration adviser. If the applicant has authorised all advisers within an organisation to act on their behalf at |Bs|, only the person named at |Bs| must complete this section. If the applicant does not have an immigration adviser, this section does not have to be completed. Tick the **one** option that applies to you I am a licensed immigration adviser under the New Zealand Immigration Advisers Licensing Act 2007. Go to 12 I am exempt from licensing under the New Zealand Immigration Advisers Licensing Act 2007. Go to 3 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, unless you are exempt. **Licensed advisers.** Provide your licence details. Licence type full provisional limited. List conditions specified in the register. Licence number | 2 , 0 , Go to Section K: Declaration by person helping the applicant to complete this form.. **Exempt from licensing.** Tick one box below to show why you are exempt from licensing. ☐ I provided immigration advice in an informal or family context only, and I did not provide the advice systematically or for a fee. I am a New Zealand member of Parliament or member of their staff and I provided immigration advice as part of my employment agreement. I am a foreign diplomat or consular staff. I am an employee of the New Zealand public service and I provided immigration advice within the scope of my employment agreement. ☐ I am a lawyer and I hold a current practising certificate as a barrister or as a barrister and solicitor of the High Court of New Zealand.  $\bigsqcup$  I am employed by, or I am working as a volunteer for, a New Zealand community law centre where at least one lawyer is on the employing body of the community law centre or is employed by or working as a volunteer for the community law centre in a supervisory capacity. I am employed by, or I am working as a volunteer for, a New Zealand citizens advice bureau.

Go to Section K: Declaration by person helping the applicant to complete this form.

# Section L Declaration by person helping 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 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.

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, or email 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.  $\square$  Same as name and address given at  $\square$ , or  $\square$  as below. Given/first name(s) Family/last name Organisation name (if applicable) and address \_\_\_\_\_ | For help search: www.nzbn.govt.nz New Zealand Business Number (if applicable) Telephone (daytime) Telephone (evening) Email Fax 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 ☐ I have **assisted** the applicant with recording information on the form ☐ I have **assisted** the applicant in another way *Specify*  $\sqcup$  I have **provided immigration advice** (as defined in the Immigration Advisers Licensing Act 2007) and my details in Section J: Immigration adviser's details are correct. Signature of person assisting 

#### About the information you provide

#### Deciding whether you are eligible for a visa

Immigration New Zealand collects the information about you on this form to decide whether you are eligible for a visitor visa under the Temporary Retirement Category in New Zealand. 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 if you think it is necessary. The address of Immigration New Zealand is PO Box 1473, Wellington 6140, New Zealand. This is not where your application should be sent.

#### 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).

## Returning your documents

Please return documents to me by secure post at the
address given at:
☐ B1
☐ B2
☐ B3

#### **Application checklist**

OFFICE USE ONLY	Information and documents you must supply	CHECK LIST
	I have completed and signed the application form.	
	I have provided my application fee and levies.	
	I have attached my passport*.	
	I have attached <b>two</b> recent passport-size photographs of myself and each applicant.	
	I have attached evidence of my annual income.	
	I have attached my marriage certificate (if applicable).	
	I have attached appropriate evidence to show that my partnership is genuine and stable (if applicable).	
	I have attached my/our full birth certificate(s).	
	I have attached my/our police certificate(s).	
	I have attached my/our completed medical and chest X-ray certificates, if required.	
	I have attached English language translations for all supporting documents not already in English.	

<sup>\*</sup>While you can provide a certified copy of your passport with your application, we highly recommend you provide your original passport. This will enable us to process your application faster and it may be needed to complete your application. Please note during the processing of an application an immigration officer may request any document, including your original passport.

Sect	ion	M
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# Paying your application fee and levies

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			
CVC/CVV 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 DIDIMIMINIAN AND AND AND AND AND AND AND AND AND A			
Signature of cardholder			
Date DIDIEMIMICATALE			



