INZ 1189



Tourist/Business Visitor Visa Application

for use by people outside New Zealand intending a short stay

Who can use this form?

To use this form, you must be:

- · outside New Zealand
- travelling to New Zealand for either tourism or business
- intending to spend less than six months in New Zealand
- financially supported by your own funds if you are travelling as a tourist, or by your employer if you are travelling for business.

If you do not meet these requirements, please use the form *Visitor Visa Application (INZ 1017)*.

You can use this form to apply for a visa for a single applicant or for a family. A family may include a principal applicant, partner, and dependent children under 20.

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

3.5cm

Section A Principal applicant's personal details

All principal applicants must complete this section.

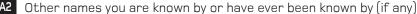
Attach **two** passport-size photographs of yourself here. The photographs must be less than six months old. Write your full name on the back of both photographs.

| A1 | Name as | shown in | nassport |
|---------------------|---------|----------|-------------|
| $\Delta \mathbf{I}$ | Name as | SHOWILL | i nassnoi c |

Family/last name

Given/first name

1



A3 Gender Male Female

Date of birth DIDIMINITY AS Preferred title Mr Mrs Ms Miss Dr other (specify)

Town/city of birth Country of birth

A7 Passport details

Number Expiry date DIDIMINITY Country

A8 Partnership status 🗌 Married 🔲 Partner 🔲 Engaged 🔲 Never married 🔲 Separated/Divorced 🔲 Widowed

A9 Do you have a national identity number, or other unique identifier that was issued to you by any government?

Yes National identity number/unique identifier

☐ No



3.5cm

| Se | ction B Contact de | tails | | | |
|---|--|-----------------|---------------------------|-----------------------------------|----------------------------|
| All p | rincipal applicants must o | complete th | his section. | | |
| B1 | Your residential address in the country you reside in. | | | | |
| | Address | | | | |
| | | | | Province/region | |
| | Telephone (mobile) | | | Telephone (other) | |
| | 1 | | | | |
| B2 | | | | | |
| | ☐ Same as address at 🖽 or ☐ as below | | | | |
| | Family | | Giv | en | |
| | | | | | |
| | Company name (if applica | able) and ac | ddress | | |
| | | | | | |
| | | | 1 | | |
| | Telephone (mobile) | | | Telephone (other) | |
| | | | | | |
| В3 | Do you authorise the per | son stated | l at 🖭 to act on your b | ehalf? U Yes U No | |
| B4 | Have you received immigration advice on this application? | | | | |
| 0 | You can find a definition of immigration advice at www.immigration.govt.nz/advice. Please note immigration advice does not include assisting the applicant by acting as a translator or by recording information on this form. | | | | |
| | Yes Please make sure that your immigration adviser completes Section I: Immigration adviser's details | | | | |
| | No | | | | |
| B5 | Names and addresses of a | any friends, | relatives, or contacts yo | ou have in New Zealand (if applic | cable) |
| | Name | | | | |
| Address | | | | | |
| Relationship Friend Family member Other (please specify) | | | | | |
| Name | | | | | |
| | Address | | | | |
| | Relationship | Fami | ly member | please specify) | |
| B6 | List your current and pre | vious two e | mployers, including peri | ods of self-employment. Start | with the current position. |
| | | te to MM/YY) | Name of employer | Location (city and country) | Occupation/Job title |
| | | esent | | (city and country) | |
| | / / | / | | | |
| | / / / | / | | | |

| Se | Section C Visa type | | |
|--|---|------------------------|-------------------|
| All p | principal applicants must complete this section. | | |
| C1 | Date you will arrive in New Zealand DIDLWIMIMJLYIYIY Date you w | vill depart New Zealan | d DIDIEMIMICATATA |
| C2 | What is the purpose of your visit to New Zealand? | Business* | ng family/friends |
| | *If you are travelling for business, please enclose a letter from your em New Zealand to confirm the purpose of your visit | nployer and/or the re | levant company in |
| Se | Section D Partner's personal details | | |
| part | principal applicants who have ticked 'Married', 'Partner' or 'Engaged' at rtner's personal details, whether or not the partner is included in this a rtner only if they are included in this application. | | |
| The p | applicable, attach two passport-size photographs of your partner here. e photographs must be less than six months old. Write your partner's full me on the back of both photographs. | | |
| D1 | Partner's name as shown in passport | | |
| | Family/last name | n | 4.5cm |
| | | | |
| | Given/first name | | |
| | | 3.5cm | 3.5cm |
| D2 | Other names your partner is known by or has ever been known by (if any) | | |
| | D3 Partne | er's gender 🔲 Male | Female |
| D4 | Partner's date of birth | | |
| D5 | Partner's preferred title Mr Mrs Mrs Ms Miss Dr other (spec | cify) | |
| D6 | Town/city of birth Country of b | oirth | |
| D7 | Partner's passport details | | |
| | Number Expiry date DIDJUMINJUYIYI | Country Country | |
| D8 Is your partner included in this application? | | | |
| Does your partner have a national identity number, or other unique identifier that was issued by any government. | | | any government? |
| | Yes Partner's national identity number/unique identifier | | |

□No

Section E Dependent children's personal details

You must complete this section with the details of each dependent child included in this application. If you wish to include more than two children in your visa application, please print an extra copy of this page and attach it to the form.

Dependent child one Attach two recent passport-size photographs of the child here. The photographs must be less than six months old. Write the child's full name on the back of both photographs. Child's name as shown in passport 4.5cm 4.5cm Family/last name 3.5cm 3.5cm Given/first name Child's passport details Expiry date DIDLWIMINITINI Number Country Town/city of child's birth Country of child's birth Dependent child two Attach two recent passport-size photographs of the child here. The photographs must be less than six months old. Write the child's full name on the back of both photographs. Child's name as shown in passport 4.5cm 4.5cm Family/last name Given/first name 3.5cm 3.5cm Child's passport details Expiry date DIDIMIMINITY IY IY Number Country Town/city of child's birth Country of child's birth

| Se | ection F Health |
|-------|---|
| All p | rincipal applicants must complete this section. |
| F1 | Do you or any person included in this application have pulmonary tuberculosis (TB)? |
| F2 | Do you or any person 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 |
| F3 | Are you or any person included in this application pregnant? |
| F4 | If you have answered Yes to any of the questions in [F1] to [F3], please provide details. |
| | |
| | |
| | |
| | |
| Se | ection G Character |
| All a | pplicants must complete this section. |
| | : if your application is declined for character reasons, Immigration New Zealand may place a notation in your passport indicating that you applied for a for New Zealand. |
| G1 | Have you or any other person included in this application been: |
| | • convicted Yes No |
| | chargedunder investigationYesNo |
| | for any offence(s) against the law in any country? |
| G2 | Have you or any other person included in this application been: |
| | excluded (refused entry) from refused a visa by removed or deported from any country? Yes No No |
| | u have answered Yes to any of the questions in ^{©1} and ^{©2} , please provide details below. Continue on a separate piece of paper if issary. |
| | |
| | |
| | |

Section H Declaration by applicant

All of the people included in this application must complete this section.

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

I will inform Immigration New Zealand of any relevant fact or change of circumstances 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 understand that I am not entitled to free health care in New Zealand, and 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 return my application.

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 authorise Immigration New Zealand to make any necessary enquiries about information on this form so that they can:

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

I authorise any agency that holds information (including personal information) related to those matters to disclose that information to Immigration New Zealand.

| Signature of principal applicant | Date Date Date | | |
|---|---|--|--|
| Signature of partner | Date DIDIMIMIATIA | | |
| Signature of dependent child | Date Description Date | | |
| Signature of dependent child | Date DINIMINIALA | | |
| Note that a parent or guardian may sign on behalf of a ch | ild under 18 years. | | |
| Section I Immigration adviser | s details | | |
| adviser, this section does not have to be | applicant's immigration adviser. If the applicant does not have an immigration completed. If you have assisted the applicant solely by acting as a translator, you do not have to complete this section. Complete Section J: Declaration by | | |
| 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 II I am exempt from licensing under the New Zealand Immigration Advisers Licensing Act 2007. Go to II I I am exempt from 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. Licence type | full provisional limited List conditions specified in the register. | | |
| Licence number $\begin{bmatrix} 2 & 0 \\ 1 & 1 \end{bmatrix}$ | Go to Section J: Declaration by person assisting the applicant. | | |
| 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. | | | |
| | nd public service and I provided immigration advice within the scope of my | | |
| I am a lawyer and I hold a current pof New Zealand. | practising certificate as a barrister or as a barrister and solicitor of the High Court | | |
| | is a volunteer for, a New Zealand community law centre where at least one lawyer is nunity law centre or is employed by or working as a volunteer for the community law | | |
| ☐ I am employed by, or I am working a Go to Section J: Declaration by person assisting the appl | s a volunteer for, a New Zealand citizens advice bureau. icant. | | |

Section J

Declaration by person assisting the applicant

This section must be completed and signed 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 |
| Same as address given at B2, or as below. |
| Family/last name |
| |
| Given/first name(s) |
| |
| Company name (if applicable) and address |
| |
| |
| Telephone (daytime) |
| Telephone (evening) |
| Fax |
| Email |
| 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 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 in Section I: Immigration adviser's details are correct. |
| Signature of person assisting |
| |

Date DIDITMINITATION

Section K Paying your application fee

Please see our Fees Guide (INZ 1028) or our website www.immigration.govt.nz/fees for more information about current fees and payment methods.

| Your application fee |
|---|
| Amount you are paying: |
| Currency |
| Application number (office use only) |
| Preferred methods of payment |
| We recommend that you use one of the following methods of payment for better security and faster processing: |
| Bank cheque/bank draft Credit card* (choose one) |
| ☐ Mastercard ☐ Visa |
| SWITCH card (UK only) |
| Name of cardholder |
| |
| Card number* |
| |
| Expiry date |
| Signature of cardholder |
| |
| Date D_D_MMMJ[Y_Y_Y_Y] |
| To be removed and securely destroyed after credit card transaction is processed |
| *Your CVC/CVV number is also required if you are paying by electronic credit card and your application is being lodged at Immigration New Zealand branches in Moscow, London or Pretoria, or the MFAT posts in The Hague or Paris. |
| If your application will be lodged in one of these branches, please provide your CVC/CVV number here. |
| Note: your CVC/CVV number is the three-digit number found on the signature strip on the back of your credit card. |
| Other methods of payment |
| Personal cheque. Note that we will hold your application for 10 working days to allow the cheque to be cleared. |
| Cash. Our New Zealand branches do not accept cash. Most of our branches outside New Zealand do not accept cash. |
| We do not accept money orders. |

Where to send your application

Go to www.immigration.govt.nz/contactus to check which Immigration branch will process your application.

About the information you provide

Immigration New Zealand collects the information about you on this form to decide whether you are eligible for a 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.

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 checkin 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).

If you come to New Zealand, you will be able to ask to see 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 3705, Wellington, New Zealand. This is not where your application should be sent.

| Application checklist | | | | |
|--|--|--|--|--|
| OFFICE USE ONLY | Information and documents you must supply | | | |
| | I have completed and signed the application form. | | | |
| | I have provided my application fee. | | | |
| | I have attached my passport or travel document (the original document). | | | |
| | I have attached two recent passport-size photographs. | | | |
| | I have attached my itinerary. | | | |
| | I have attached evidence of funds for support. | | | |
| | I have attached a letter from my employer regarding my purpose in New Zealand (if travelling for business) | | | |
| | | | | |
| Returning your documents | | | | |
| Tick one of the following options | | | | |
| I wish to collect my documents when ready. | | | | |
| Return all documents to me by secure post at the address given at B2. You may be required to pay for postage. Please see www.immigration.govt.nz/contactus and select your branch to check if a postage fee applies. | | | | |