

INZ 1058



Long-Term Business Visa Application

Application for a multiple entry work visa

Use the guide to help you complete the application form

Read the *Long-Term Business Visa Guide (INZ 1059)* **before** you complete this application form. The guide contains helpful information about how to complete the application form. When you have completed the form, 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.

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, INZ 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 write clearly in English using CAPITAL LETTERS.

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.

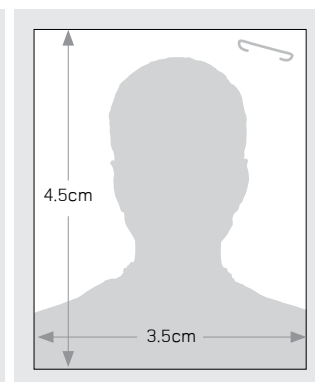
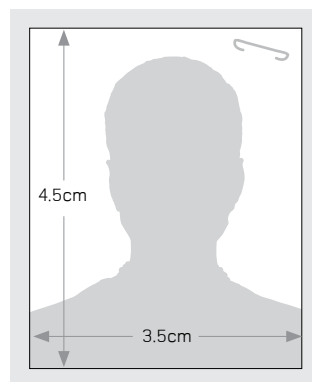
Write your full name on the back of each photograph.

i For more information about the questions in this section, see 'Completing Section A: Principal applicant's personal details' in the *Long-Term Business Visa Guide*.

A1 Name as shown in passport

Family/last name

Given/first name(s)



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



For further information on immigration
visit www.immigration.govt.nz

April 2013

A6 Date of birth | D | D | M | M | Y | Y | Y | Y

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Country	Expiry date
	D D M M Y Y Y Y

All principal applicants must complete this section.

Telephone (daytime) | | Telephone (evening) |

Fax | | Email |

Address

☐ Same as address at **B1**, or ☐ Same as address at **B2**, or ☐ as below

Name |

Address

Telephone (daytime) | Telephone (evening) |

Fax		Email	
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B4 If you have given the name and address of an agent at **B3**, do you authorise that agent to act on your behalf?

☐ Yes ☐ No ☐ Not applicable

B5 Have you received immigration advice on this application?

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

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

☐ No

B6 ☐ Tick here if you would like us to email you instructions for registering to check online how your application is progressing.

By ticking this option you will also be advised by email when your application has been decided. *Note: this facility is only available for applications lodged at an Immigration New Zealand branch office listed in the 'For more information' section of this form.*

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

Section C Principal applicant's family details

C1 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	Country of residence
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Brothers and sisters (including half, step- and adopted brothers and sisters).

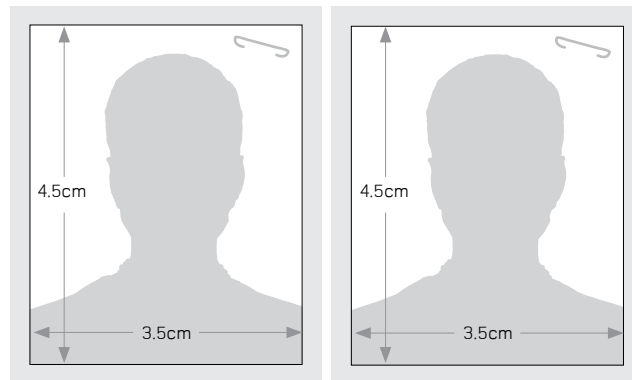
Full name	Gender (M/F)	Date of birth (DD/MM/YY)	Partnership status	Country of residence
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Children (including biological, adopted and step-children, including those from previous marriages/relationships).					
Full name	Gender (M/F)	Date of birth (DD/MM/YY)	Partnership status	Country of residence	Does the person intend to migrate with you? (Y/N)
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Section D Partner's personal details

i For a definition of partner and more information on the questions in this section see 'Completing Section D: Partner's personal details' in the *Long-Term Business Visa Guide*.

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 each photograph.



D1 Partner's name as shown in passport

Family/last name

Given/first name(s)

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 name in ethnic script

D5 Partner's gender ☐ Male ☐ Female

D6 Partner's date of birth

D7 Partner's town/city of birth

Partner's country of birth

D8 Other citizenships your partner holds

D9 Passport detailsNumber Country Expiry date **D10** Is your partner applying for a work or visitor visa? ☐ Work ☐ Visitor**D11** How long have you been living together in this partnership? Years Months**D12** Do you meet the minimum requirements for recognition of partnership? ☐ Yes ☐ No**D13** Are you living together in a genuine and stable partnership? ☐ Yes ☐ No *Explain why you are not living together.*

Section E Partner's family details**E1** 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 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	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	Country of residence
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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	Country of residence	Does the person intend to migrate with you? (Y/N)
		/ /			
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		/ /			

Section F Dependent children

Supply the following details for each dependent child included in this application. Ensure that you complete **F29** (at the end of this section). If you have no dependent children included in this application, go to Section G: Additional details.

i For more information on the questions in this section see 'Completing Section F: Dependent children' in the *Long-Term Business Visa Guide*.

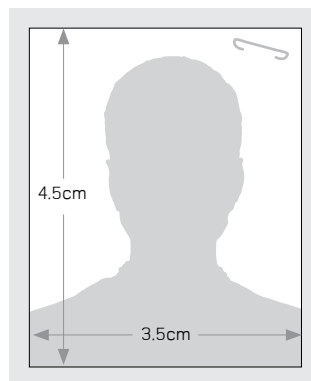
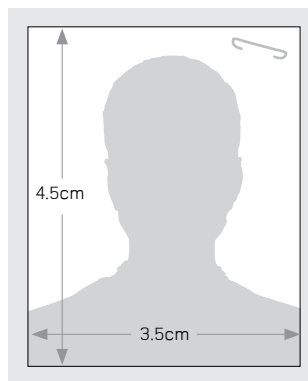
Dependent child one

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 each photograph.

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

F4 Child's country of birth

F5 Child's passport details

Number Country

F6 Other citizenships child holds

F7 Is your child applying for a student or visitor visa? ☐ Student ☐ Visitor

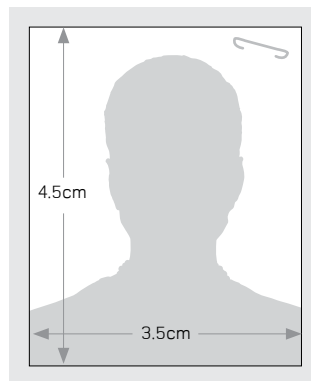
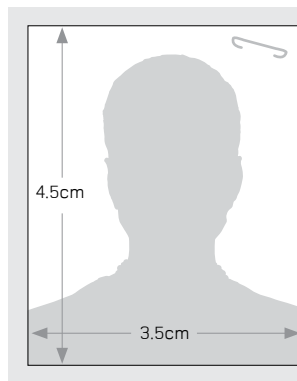
Dependent child two

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 each photograph.

F8 Child's name as shown in passport

Family/last name

Given/first name(s)



F9 Child's gender ☐ Male ☐ Female

F10 Child's date of birth

D	D	M	M	Y	Y	Y	Y
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F11 Child's country of birth

F12 Child's passport details

Number Country

F13 Other citizenships child holds

F14 Is your child applying for a student or visitor visa? ☐ Student ☐ Visitor

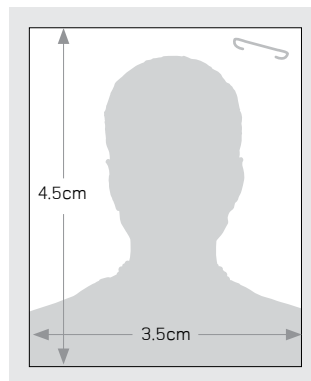
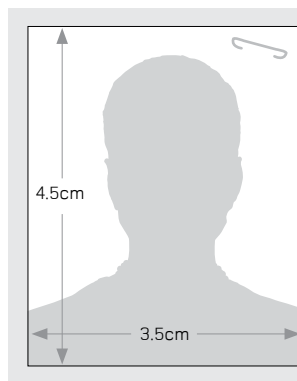
Dependent child three

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 each photograph.

F15 Child's name as shown in passport

Family/last name

Given/first name(s)



F16 Child's gender ☐ Male ☐ Female

F17 Child's date of birth

D	D	M	M	Y	Y	Y	Y
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F18 Child's country of birth

F19 Child's passport details

Number Country

F20 Other citizenships child holds

F21 Is your child applying for a student or visitor visa? ☐ Student ☐ Visitor

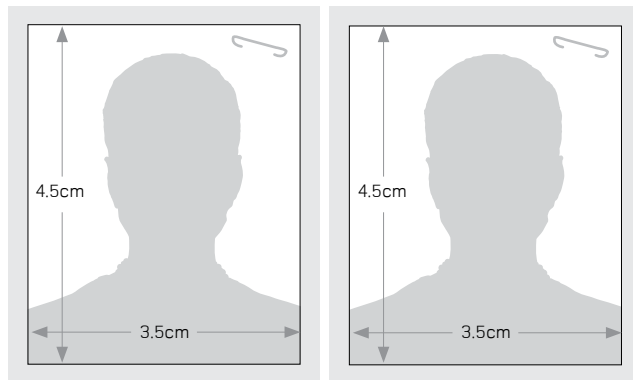
Dependent child four

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 each photograph.

F22 Child's name as shown in passport

Family/last name

Given/first name(s)



F23 Child's gender ☐ Male ☐ Female

F24 Child's date of birth

F25 Child's country of birth

F26 Child's passport details

Number Country

F27 Other citizenships child holds

F28 Is your child applying for a student or visitor visa? ☐ Student ☐ Visitor

F29 Does any person not included in this application have custody or visitation rights over any of the above children?

☐ Yes *Supply evidence that you have been granted the right to bring this child permanently to New Zealand.*

☐ No

Section G Additional details

Complete this section for everyone included in the application aged 17 years or over.

G1 Do you or any other person included in this application have a national identity number, or other unique identifier that was issued to you by any government?

☐ Yes *Provide details* ☐ No

Name of applicant	National identity number/unique identifier
1.	
2.	
3.	
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G2 Have you or any other person included in this application completed military service in any country?

☐ Yes *Provide information about your/their military service including the dates of your/their military service, your/their position and rank, the unit or units that you/they served in, and your/their role within each unit.*

☐ No

Name of applicant	Date from (DD/MM/YY)	Date to (DD/MM/YY)	Rank	Unit name or number	Role
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List any military identity numbers you/they were given.

G3 Are you or any other person included in this application presently subject to military service obligations in any country?

☐ Yes ☐ No *If no, and you/they are a citizen of a country in which compulsory military service exists, give details.*

G4 Have you or any other person included in this application been associated with any intelligence agency or group, or law enforcement agency?

☐ Yes *Describe how you/they were involved.* ☐ No

G5 Have you or any other person included in this application been associated with any group or organisation that has used or promoted violence to further their aims?

☐ Yes *Describe how you/they were involved.* ☐ No

G6 Have you or any other person included in this application ever committed or been involved in war crimes, crimes against humanity, and/or human rights abuses?

☐ Yes Describe how you/they were involved. ☐ No

Section H Character requirements

Answer **H1** and **H2** in respect of every person in your application 17 years of age and over if:

- this is your first application for a long term business visa (LTBV); or
- you have held an LTBV for three years and are applying for a further work visa.

i For more information about the questions in this section, see 'Completing Section H: Character requirements' in the *Long-Term Business Visa Guide*.

H1 List the countries, including all countries of citizenship, you and/or your family (if applicable) have lived in for more than five years since attaining the age of 17 and attach police certificates from each of these countries.

Name of applicant or family member

Name of country

Date of arrival

Date of departure

Name of applicant or family member

Name of country

Date of arrival

Date of departure

Name of applicant or family member

Name of country

Date of arrival

Date of departure

Name of applicant or family member

Name of country

Date of arrival

Date of departure

Name of applicant or family member

Name of country

Date of arrival

Date of departure

H2

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

☐ Yes ☐ No

Have you or any of your family members included in your application ever been:

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

If you answered **Yes** to any of the questions in **H2** give full details and the name of the family member(s).

[illegible]

Continue on a separate sheet if necessary.

Section I Health requirements

I1 Have you or any person included in this application submitted a *General Medical Certificate (INZ 1007)* and *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 X-ray, unless a special report is required.

Go to **I2**.

Full name	Type of application	Date application was lodged (DD/MM/YY)
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 application, in which case a new chest X-ray certificate is required.

If not everyone included in the application has submitted medical certificates that were completed and dated by a medical practitioner within the last 36 months, they will have to provide certificates now. Go to **I2**.

I2 Do you or any person included in this application have tuberculosis (TB)? ☐ Yes ☐ No

I3 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 ☐ Yes ☐ No
- Hospital care ☐ Yes ☐ No
- Residential care ☐ Yes ☐ No

Residential care is long-term care provided in live-in facilities for the aged or for people with physical, sensory, intellectual, or psychiatric disabilities.

I4 Do you have a dependent child included in this application who requires special education services? (See Completing Section I: Health requirements in the Long-Term Business Visa Guide (INZ 1059) for further information).

☐ Yes ☐ No

I5 If you have answered **Yes** to any of the questions in **I2** to **I4**, please provide details.

I6 Are you or any person included in this application pregnant?

☐ Yes Date the pregnant applicant is due to give birth

D	D	M	M	Y	Y	Y	Y
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☐ No

Section J English language requirements

i For more information see 'Completing Section J: English language requirements' in the *Long-Term Business Visa Guide* (INZ 1059)

Minimum English language requirements apply to first-time applicants or applicants seeking a further three-year long-term business visa who have not previously met English language requirements.

J1 Do you meet the minimum standard of English language? ☐ Yes *Provide evidence of your English language ability.* ☐ No

Note: If you have held a work visa under LTBV instructions for less than three years, you are applying for a further work visa, and the business proposal consented to by INZ has not changed, you do not need to answer the questions in Sections K to O. Go to Section P: Declaration.

Section K Business plan information

i For more information about the questions in this section, see 'Completing Section K: Business Plan Information' in the *Long-Term Business Visa Guide*.

Questions **K1** and **K2** are for statistical purposes only. All details of a business proposal should be covered in the business plan.

K1 What is your intended business? (Tick one only.)

- | | | |
|--|---|---|
| <input type="checkbox"/> Administration/customer service | <input type="checkbox"/> Advertising/media/public relations | <input type="checkbox"/> Agriculture/forestry/fishing |
| <input type="checkbox"/> Arts/culture/entertainment | <input type="checkbox"/> Education/training | <input type="checkbox"/> Engineering/science |
| <input type="checkbox"/> Export business | <input type="checkbox"/> Fashion and beauty | <input type="checkbox"/> Film/video |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Health care | <input type="checkbox"/> Hospitality/restaurant |
| <input type="checkbox"/> Human resources | <input type="checkbox"/> Import business | <input type="checkbox"/> Information technology |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Sales/Marketing | <input type="checkbox"/> Sports | <input type="checkbox"/> Telecommunication |
| <input type="checkbox"/> Tourism/accommodation | <input type="checkbox"/> Water/gas/electricity | |
| <input type="checkbox"/> Other (<i>specify</i>) | | |

K2 In which town or city do you intend to locate your business?

K3 State the amount of funds available for the maintenance and accommodation costs of all family members included in the application. This must be sufficient for three years and must be additional to the investment capital required for your business.

NZ\$ *Attach evidence.*

K4 What is the status of your proposed business?

- ☐ New *Go to Section L: Business outline*
- ☐ Established *Go to **K5***

K5 Please provide full details of the trading name and address, and the vendor's name and contact details, of the business you intend to purchase.

You should also include:

- any conditional sale and purchase agreement
- the basis for the purchase price (i.e. an independent valuation), and
- a profit and loss statement for at least the two previous years, including up to the date of your application. You should also comment on the business's past performance and trends.

☐ Yes *Please state which franchise.*

☐ No

Section L Business outline

i For more information about the questions in this section, see 'Completing Section L: Business outline' in the *Long-Term Business Visa Guide*.

[illegible]

☐ Sole trader ☐ Partnership ☐ Limited liability company ☐ Subsidiary of overseas company
☐ Other |

☐ Yes Give details of overseas company, activities, location, and nature of proposed relationship.

☐ No

|

L5 How will your proposed business benefit New Zealand?

L6 What is your intended involvement/role in the operation of the proposed business?

L7 How many new full-time employees will the business require? (Excluding all principal and secondary applicants that are included in the application.)

Note: If you are purchasing an existing business, this number should be the additional full-time employees that will be required.

L8 Please provide the position titles of the new positions that will be needed.

L9 What type of skills will these employees require, and are these skills readily available in New Zealand?

L10 If you are purchasing an existing business, how many people work (in any capacity) within the business?

Note: If you are not purchasing an existing business, you do not need to answer this question.

L11

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

L12

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

Strengths	Weaknesses
Opportunities	Threats

L13

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

Section M Financial information

i For more information about the questions in this section, see 'Completing Section M: Financial information' in the *Long-Term Business Visa Guide*.

Financing options

- M1** What level of capital investment will the business require? (This should include capital investment and operating expenditure.)

Attach third party evidence that you have these funds available.

- M2** What level of capital will you bring into the business?

- M3** What level of working capital will the business require?

- M4** Will the business require additional financing? ☐ Yes ☐ No

- M5** How are you intending to arrange financing for your business? Include with your answer details of potential financiers or equity partners.

- M6** What level of opening stock and baseline stock will be required?

Financial forecasts

- M7** Provide details of the start-up costs for the business, research and development, recruitment, asset purchase, including legal and professional fees etc.

M8 Provide details of the forecast profit and loss statements for the business in the format detailed below. Complete form or attach forecasts separately.

Forecast profit and loss statement			
NZ\$000	Year 1	Year 2	Year 3
Revenue (A)			
Cost of sales (B):			
Labour			
Overheads			
Raw materials			
.....			
Gross margin (C=A-B)			
Expenses (D):			
Salaries			
Rent			
Depreciation			
Administration			
Audit fees			
Legal fees			
.....			
Earnings before interest (E=C-D)			
Interest (F)			
Net profit (G=E-F)			
Tax (H =G x 33%)			
Net profit after tax, available to shareholders (I=G-H)			
Ratios			
Gross margin % (= C/A x100)			
Net profit after tax/revenue % (=I/A x100)			
Interest cover — times (=E/F)			

M9 Provide a three-year cash flow forecast for the proposed business, in the format detailed below. Complete the form below or attach forecasts separately.

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

Section N Business experience

i For more information about the questions in this section, see 'Completing Section N: Business experience' in the *Long-Term Business Visa Guide*.

N1 Describe your past and present business management experience. Include details of how you started out, and the type and nature of businesses you have been involved in. Give specific details of your responsibilities and duties within the company(ies).

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There is a small black L-shaped mark in the top-left corner, likely indicating where the paper was bound or scanned.

N2 Provide details of your businesses, including business type, background, turnover, profitability, number of employees and contact details for the businesses.

[illegible]

N3 What is your share of ownership in each of your businesses?

N4 Have you ever been involved in a business failure or bankruptcy?

☐ Yes *Provide details*

☐ No

N5 Have you ever been convicted of fraud or financial impropriety?

☐ Yes *Provide details*

☐ No

N6 Provide details of any business or trade qualifications and university degrees, including institution, date and qualification type, and attach certified copies of these.

N7 Does your proposed business require you to utilise any professional qualifications?

☐ Yes *Provide proof that you have obtained full registration of these qualifications in New Zealand.*

☐ No

Section O Knowledge of New Zealand market

i For more information about the questions in this section, see 'Completing Section O: Knowledge of New Zealand market' in the *Long-Term Business Visa Guide*.

O1 Describe the extent of your knowledge regarding the New Zealand business environment.

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

☐ Yes *Provide details of your involvement*

☐ No

03 Have you made contact or sought advice from relevant trade associations in New Zealand?

☐ Yes *Provide details of the contact*

☐ No

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

☐ Yes *Provide details of the research*

☐ No

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

☐ Yes *Provide details of the advice and the outcome*

☐ No

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

☐ Yes *Provide details*

☐ No

07 Do you have family members or associates who are currently operating similar businesses in New Zealand?

☐ Yes *Provide details of this business*

☐ No

Section P Declaration

This section must be signed by the principal applicant and any partner and dependent children aged 18 years and over who are included in the application. Make sure you understand the declarations below before you sign them.

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 material way after it has been signed, my application may be declined, and I may become liable for deportation. I may also be committing an offence and I may be imprisoned.

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

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

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

I 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.

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

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

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

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

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

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

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

Signature of principal applicant _____ Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of partner _____ Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of accompanying dependent children over 18 years of age (if applicable)

Dependent child one over 18 years of age _____ Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Dependent child two over 18 years of age _____ Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Dependent child three over 18 years of age _____ Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Dependent child four over 18 years of age _____ Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Section Q

Immigration adviser's details

This section must be completed by the applicant's immigration adviser. If the applicant does not have an immigration adviser, this section does not have to be completed.

Q1 If you are a licensed adviser, please provide your licence details.

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

Licence number 20 *Go to Section R: Declaration by person assisting the applicant*

Q2 If you are exempt from licensing, tick **one** box below to show why you are exempt from licensing then go to Section R: Declaration by person assisting the applicant.

- ☐ 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

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

Section R

Declaration by person assisting the applicant

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 not exempt under the Immigration Advisers Licensing Act 2007, it is an offence for you to provide immigration advice without holding a license, and Immigration New Zealand will refuse to accept your client's application. More information about immigration adviser licensing can be obtained from the Immigration Advisers Authority website www.iaa.govt.nz, via email info@iaa.govt.nz or by telephone on 0508 422 422.

Name and address of person assisting applicant. ☐ Same as address given at **B3**, or ☐ as below.

Family/last name

Given/first name(s)

Company name (if applicable) and address

Telephone |

Email

I understand that after the applicant has signed this form it is an offence for me to change or add further information,

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

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*

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

☐ I have **provided immigration advice** (as defined in the Immigration Advisers Licensing Act 2007) and my details in Section Q: Immigration adviser's details are correct.

Signature of person assisting

Date

D D M M Y Y Y Y

Application checklist

Ensure you enclose the correct documents with your *Long-Term Business Visa Application (INZ 1058)* according to the table below. **If you fail to provide any of these documents, your application may be returned.**

OFFICE USE ONLY	If you are a first-time long-term business visa applicant ('interim')	CHECK LIST
<input type="checkbox"/>	I have completed and signed the application form.	<input type="checkbox"/>
<input type="checkbox"/>	I have provided my application fee.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached passport(s) or certificate(s) of identity (the original document).	<input type="checkbox"/>
<input type="checkbox"/>	I have attached two recent passport-sized photographs.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached evidence of my relationship to my partner and dependent children that are listed on my application and will be accompanying me to New Zealand.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached evidence that I meet English language requirements.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached a completed <i>General Medical Certificate (INZ 1007)</i> (less than three months old) if required. Provide this if you, or any other applicant included have not previously provided a medical certificate, or if your/their previous medical certificate is older than 36 months, or your/their health has deteriorated since your last application.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached a completed <i>Chest X-ray Certificate (INZ 1096)</i> (less than three months old). Provide this if you, or any other applicant included, have not previously provided a chest X-ray certificate, or if your/their previous chest X-ray certificate is older than 36 months, or your/their health has deteriorated since your last application, or if any applicant included, has spent six consecutive months in a place not listed as having a low incidence of tuberculosis since their last application.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached police certificates.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached business plan(s) and supporting documents.	<input type="checkbox"/>

OFFICE USE ONLY	If you have held a work visa under LTBV instructions for less than three years and are applying for a further work visa	CHECK LIST
<input type="checkbox"/>	I have completed and signed the application form.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached passport(s) or certificate(s) of identity (the original document).	<input type="checkbox"/>
<input type="checkbox"/>	I have attached two recent passport-sized photographs.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached evidence of my relationship to my partner and dependent children that are listed on my application and will be accompanying me to New Zealand. <i>Provide this evidence only if you have not provided it before.</i>	<input type="checkbox"/>
<input type="checkbox"/>	I have attached evidence that I meet English language requirements. <i>Provide this evidence only if you have not provided it before.</i>	<input type="checkbox"/>
<input type="checkbox"/>	I have attached a completed <i>General Medical Certificate (INZ 1007)</i> and a <i>Chest X-ray Certificate (INZ 1096)</i> (which are less than three months old). Provide this if the certificates previously provided for any applicant included are older than 36 months, or if the health of any applicant included has deteriorated since your last application.	<input type="checkbox"/>

OFFICE USE ONLY	If you are applying for consent to change your business plan	CHECK LIST
<input type="checkbox"/>	I have completed and signed the application form.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached business plan(s) and supporting documents.	<input type="checkbox"/>

OFFICE USE ONLY	If you have held a work visa under LTBV instructions for three years and are applying for a further work visa ('renewal')	CHECK LIST
<input type="checkbox"/>	I have completed and signed the application form.	<input type="checkbox"/>
<input type="checkbox"/>	I have provided my application fee.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached passport(s) or certificate(s) of identity (the original document).	<input type="checkbox"/>
<input type="checkbox"/>	I have attached two recent passport-sized photographs.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached evidence of my relationship to my partner and dependent children that are listed on my application and will be accompanying me to New Zealand. <i>Provide this evidence only if you have not provided it before.</i>	<input type="checkbox"/>
<input type="checkbox"/>	I have attached evidence that I meet English language requirements. <i>Provide this evidence only if you have not provided it before.</i>	<input type="checkbox"/>
<input type="checkbox"/>	I have attached a completed <i>General Medical Certificate (INZ 1007)</i> and a <i>Chest X-ray Certificate (INZ 1096)</i> (which are less than three months old). Provide this if the certificates previously provided for any applicant included are older than 36 months, or if the health of any applicant included has deteriorated since your last application.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached police certificates.	<input type="checkbox"/>
<input type="checkbox"/>	I have attached business plan(s) and supporting documents.	<input type="checkbox"/>

Returning your documents

Tick one of the following options

I wish to collect my documents when ready. <i>(This option is not available to applicants in the Auckland region.)</i>	<input type="checkbox"/>
Return all documents to me by secure post at the address given at B3 .	<input type="checkbox"/>



About the information you provide

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

Other documents we may need

Sometimes we may ask for additional documents or information so that we can consider it with this application.

Other documents you may wish to send

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, you will be asked to produce it later.

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 S

Paying your application fee

To find out how much the fee is and where to send your application, use our office and fees finder at www.immigration.govt.nz/fees.

Note: some offshore branches do not accept credit cards. The office and fees finder contains information about alternative methods of payment.

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) SWITCH card Issue number

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 card.

Expiry date

Signature of cardholder

Date

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.*

☐ EFTPOS. *Note this option is only available for applications lodged in person in one of our New Zealand offices.*

We do not accept money orders.

newzealand.govt.nz