

# Application for Residence in New Zealand under the Entrepreneur and Employee of a Relocating Business Categories

Category of entry you are applying for:

Entrepreneur

Employee of a relocating business

For help completing this form, refer to the **Guide to Applying for Residence under the Entrepreneur and Employee of a Relocating Business Categories** (NZIS 1057).

## Section A Personal Details

Client number:

### Principal applicant

A1

Name as shown in passport

Family:  Given:

A2

Preferred title Mr  Mrs  Ms  Miss  Dr  Other   
(please specify)

A3

Other names you are known by

A4

Your name in ethnic script

A5

Gender Male  Female

A6

Date of birth     
day month year

A7

Place and country of birth Place:  Country:

A8

Partnership status  Married  Never married  Partner  
 Separated  Widowed  Divorced

A9

Passport details Number:  Country:

A10

Other citizenships currently held

A11

What is your main occupation?

Your main occupation is the job you spent most hours doing in the last 12 months. If you have not worked in the last 12 months, please state your previous occupation. If you have not worked for the last 5 years or more, please state "Not applicable".

Pin or staple two recent passport size photographs of yourself here. Write your name on the back of each photograph.

A12

Name and address for correspondence (or agent details). Use both English and own language where required.

<input type="text"/>	Phone/ day:	<input type="text"/>
<input type="text"/>	Phone/ night:	<input type="text"/>
<input type="text"/>	Fax:	<input type="text"/>
<input type="text"/>	Email:	<input type="text"/>

A13

If you have given the name and address of an agent in A12 do you authorise that agent to act on your behalf?

Yes  No

A14

You can check the progress of your application online by registering for our online enquiry system. By ticking this option you will also be advised by email when your application has been decided. **(Please note: this facility is only available for applications lodged at an NZIS branch office listed in the "More Information and Advice" section of this form.)**

Please email me instructions to register to check my application online.

**Please note: If you elect an agent to act on your behalf your agent will be sent instructions for online enquiry.**

Agent client reference for online enquiry

Use unique reference for each client – (up to 10 characters: no more than 3 letters permitted, e.g. A123, B1234B, or 1234C567CC are acceptable. Don't use punctuation marks or symbols.) This code will appear in any email notifications to an agent acting on behalf of an applicant.

**A15**

Your current home address and telephone number.


Phone/ day:	
Phone/ night:	
Fax:	
Email:	

Address in your home country (if different from address above).


**A16**

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.

Full name	Gender M/F	Date of birth	Partnership status	Country of residence
-----------	---------------	---------------	-----------------------	----------------------

Parents (biological and adoptive). If both parents are deceased give details of legal guardians (if any) and/or grandparents.


Brothers and sisters (including half, step and adopted brothers and sisters).


Full name	Gender M/F	Date of birth	Partnership status	Country of residence
-----------	---------------	---------------	-----------------------	----------------------

Children (including biological, adopted, step-children and children from previous partnerships). Does the person intend to migrate with you?

					Yes	No
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

# Partner

Attach two recent passport size photographs. Write name on back.

**A17**

Name as shown in passport

Family:  Given:

**A18**

Preferred title Mr  Mrs  Ms  Miss  Dr  Other  (please specify)

**A19**

Other names they are known by

**A20**

Name in ethnic script

**A21**

Gender Male  Female

**A22**

Date of birth     
day month year

**A23**

Place and country of birth Place:  Country:

**A24**

Passport details Number:  Country:

**A25**

Other citizenships currently held

**A26**

Is your partner included in your application? Yes  No

If your partner is included in your application for residence, you must provide evidence of your relationship as described in the **Guide to Applying for Residence under the Entrepreneur and Employee of a Relocating Business Categories** (NZIS 1057).

**A27**

How long have you been living together in this partnership? Years  Months

**A28**

Do you meet the minimum requirements for recognition of partnership? Yes  No

**A29**

Are you living in a genuine and stable relationship? Yes  No

If you are not living together please explain


**A30**

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.

Full name	Gender M/F	Date of birth	Partnership status	Country of residence
-----------	------------	---------------	--------------------	----------------------

Parents (biological and adoptive). If both parents are deceased, give details of legal guardians (if any) and/or grandparents.


Brothers and sisters (including half, step and adopted brothers and sisters).


Full name	Gender M/F	Date of birth	Partnership status	Country of residence
-----------	---------------	---------------	-----------------------	----------------------

Children (including biological, adoptive and step-children and from previous partnerships).

Does the person intend to migrate with you?

				Yes	No
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

## Dependent Children

Supply the following details for each dependent child included in this application

**A31**

Child's name as shown in passport

Dependent Child 1

Family:  Given:

Attach two recent passport size photographs. Write name on back.

**A32** Male  Female

**A33** Date of birth     
day month year

**A34** Country of birth

**A35** Passport number

**A36** Country of citizenship

**A37** Other citizenships currently held

**A38** Partnership status Married  Never married  Partner   
Separated  Widowed  Divorced

**A39** Does this child have child(ren) of his/her own? Yes  No

**A40**

Child's name as shown in passport

Dependent Child 2

Family:  Given:

Attach two recent passport size photographs. Write name on back.

**A41** Male  Female

**A42** Date of birth     
day month year

**A43** Country of birth

**A44** Passport number

**A45** Country of citizenship

**A46** Other citizenships currently held

**A47** Partnership status Married  Never married  Partner   
Separated  Widowed  Divorced

**A48** Does this child have child(ren) of his/her own? Yes  No

**A49**

Child's name as shown in passport

Family: Given: 

Dependent Child 3

Attach two recent  
passport size  
photographs.  
Write name on back.**A50** Male  Female **A51** Date of birth   
day month year**A52** Country of birth **A53** Passport number **A54** Country of citizenship **A55** Other citizenships currently held **A56** Partnership status Married  Never married  Partner   
Separated  Widowed  Divorced **A57** Does this child have child(ren) of his/her own? Yes  No **A58**

Child's name as shown in passport

Family: Given: 

Dependent Child 4

Attach two recent  
passport size  
photographs.  
Write name on back.**A59** Male  Female **A60** Date of birth   
day month year**A61** Country of birth **A62** Passport number **A63** Country of citizenship **A64** Other citizenships currently held **A65** Partnership status Married  Never married  Partner   
Separated  Widowed  Divorced **A66** Does this child have child(ren) of his/her own? Yes  No **A67**

Child's name as shown in passport

Family: Given: 

Dependent Child 5

Attach two recent  
passport size  
photographs.  
Write name on back.**A68** Male  Female **A69** Date of birth   
day month year**A70** Country of birth **A71** Passport number **A72** Country of citizenship **A73** Other citizenships currently held **A74** Partnership status Married  Never married  Partner   
Separated  Widowed  Divorced **A75** Does this child have child(ren) of his/her own? Yes  No

**A76**

Child's name as shown in passport

Family: Given: 

Dependent Child 6

Attach two recent passport size photographs. Write name on back.

**A77** Male  Female **A78** Date of birth     
day month year**A79** Country of birth **A80** Passport number **A81** Country of citizenship **A82** Other citizenships currently held **A83** Partnership status Married  Never married  Partner   
Separated  Widowed  Divorced **A84** Does this child have child(ren) of his/her own? Yes  No Please give details of any additional dependants on form *Additional Dependants for Residence in New Zealand* (NZIS 1001), and attach it to this page.**A85**Are you separated or divorced from the parent of any of the above children **or** is the parent of any of the above children not included in this application?No  Yes If 'Yes', refer to the *Guide to Applying for Residence under the Entrepreneur and Employee of a Relocating Business Categories* (NZIS 1057) for the information and evidence required.

## Additional Details

**Only complete this section for you and any person included in this application aged 17 years or over.****A86**

Do you or any of your accompanying family members have a National ID number, or other unique identifier that was issued to you by any government?

Yes  No 

If Yes, please list here:

Name of applicant	National ID number/unique identifier

**A87**

Have you or any of your accompanying family members undertaken military service in any country?

Yes  No 

If Yes, please provide a brief chronological account of your/their military service. Include the applicant's name, dates of your/their military service, your/their position/rank, unit(s) you/they served in, and your/their role within the unit(s). Please also list any military ID number(s) assigned to you or any person included in this application.

Name of applicant	Date from (dd/mm/yy)	Date to (dd/mm/yy)	Rank	Unit	Role
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			
	/ /	/ /			

Military ID number(s):

Name of applicant	Military ID number

**A88**

Are you or any of your accompanying family members presently subject to military service obligations in any country?

Yes  No

If No, and you or any of your accompanying family members are a citizen of a country in which compulsory military service exists, state below why you/they are exempt from military service.


**A89**

Have you or any of your accompanying family members been associated with any group or organisation that have engaged in or promoted the use of violence to further their aims?

Yes  No

If Yes, please specify:


**A90**

Have you or any of your accompanying family members been associated with any intelligence agency or group, or law enforcement agency?

Yes  No

If Yes, please specify:


**A91**

Have you or any of your accompanying family members ever committed or been involved in the commission of war crimes, crimes against humanity, and/or human rights abuses?

Yes  No

If Yes, please specify:


# Character Requirements (for help see the *Guide to Applying for Residence under the Entrepreneur and Employee of a Relocating Business Categories (NZIS 1057)*)

The following questions apply to every person included in this application 17 years of age and over.

**A92**

List the countries, including all countries of citizenship, you and/or your family (if applicable) have lived in for 12 months or more in the last ten years. Include countries where your stay has been broken by short departures.

Name	Country	Date of arrival	Date of departure

**A93**

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
- Deported, excluded or removed 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/permit 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 adhered to, any organisation or group with criminal objectives or which has engaged in criminal activities or advocated such activities? Yes  No
- A member of, or adhered to, any group of persons or organisation which, at the time of membership or adherence, 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

(You must include all convictions for any offence(s), including any which are now regarded as having lapsed under any legislation.)

If you answered "Yes" to any of the above questions, give full details and the name of the family member(s).


# Health Requirements

**A94** Please read the **Health Requirements Leaflet** (NZIS 1121) for full details of the health requirements applicable to your application.

- Have you, and every required person, attached completed **Medical and X-ray Certificate(s)** (NZIS 1007)? Yes  No

## English Language Requirements (for help see the “Guide to Applying for Residence under the Entrepreneur and Employee of a Relocating Business Categories” (NZIS 1057))

**A95** English language requirements apply to every person 16 years of age and over who is included in an application under the Entrepreneur and Employee of a Relocating Business categories.

Principal Applicants must meet the Minimum Standard of English. Partners or dependent children included in this application may **either** show that they meet the Minimum Standard of English **or** pre-purchase English language tuition.

Meets Minimum Standard of English?		
<b>Principal Applicant</b>	<input type="checkbox"/> YES - State evidence provided with your application	<input type="checkbox"/> NO – Your application cannot be approved
<b>Other Applicants (State Names)</b>	YES - State evidence provided with application	NO - Intends to pre-purchase ESOL tuition?
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO

## Checklist for section A

Complete the following checklist to ensure that lodgement requirements for all applicants are met, in addition to the business information requirements set out on the following pages.

**Failure to provide any of the information requested below for all applicants included in the application may result in your application being returned.**

For all applicants under the Entrepreneur and Employee of a Relocating Business categories

- A completed application form
- Current passport(s) or certificate of identity
- Two passport sized photographs
- Full birth certificate(s)
- Application fee
- Police report(s) less than six months old (for all applicants aged 17 and over)
- Evidence the principal applicant meets the minimum standard of English
- Evidence any partner or dependent children included in the application meets the minimum standard of English (unless they intend to pre-purchase full ESOL tuition)
- Evidence of relationship with the principal applicant
- Evidence that you and your partner (if applicable) meet Partnership policy requirements
- Completed **Medical and X-ray Certificate(s)** (NZIS 1007) (less than three months old) for every required person

# Section B Entrepreneur

Refer to section B of the *Guide to Applying for Residence under the Entrepreneur and Employee of a Relocating Business Categories* (NZIS 1057) for help in completing this section. Please attach further documentation as required.

**B1** Have you held or do you currently hold a Long-term Business Visa/Permit? Yes  No

**B2** Details of established business in New Zealand

Trading name:  Address:

**B3** Briefly outline the nature of your business and the benefits to New Zealand

**B4** Ownership structure Sole trader  Partnership  Limited Liability company   
 Subsidiary of overseas company  Other (specify)

**B5** Shareholding Number of shareholders:  Your shareholding:

**B6** Your role/involvement in the business

**B7** Number of staff employed (full-time and part-time)

**B8** Provide details of the profit and loss statement for the past two years in the chart below:

NZ \$000	Year 1	Year 2
<b>Revenue (A)</b>		
<b>Cost of sales (B):</b>		
Labour		
Overheads		
Raw materials		
<b>Gross Margin (C=A-B)</b>		
<b>Expenses (D):</b>		
Salaries		
Rent		
Depreciation		
Administration		
Audit fees		
Legal fees		
<b>Earnings before interest (E=C-D)</b>		
Interest (F)		
<b>Net Profit (G=E-F)</b>		
Tax (H = G x 33%)		
<b>Net Profit after Tax, available to shareholders (I=G-H)</b>		
<b>Ratios</b>		
Gross Margin % (=C/A x100)		
Net profit after tax/Revenue % (=A/I x 100)		
Interest cover – times (=E/F)		

## Section C Employee of a Relocating Business

Refer to section C of the *Guide to Applying for Residence under the Entrepreneur and Employee of a Relocating Business Categories* (NZIS 1057) for help in completing this section.

### C1 Business details in New Zealand

Trading name:

Address:

  

### C2 Your role/involvement in the business

### C3 Your educational qualifications

Date obtained

Qualification

Educational institution (if applicable)

Date obtained	Qualification	Educational institution (if applicable)

### C4 Your work experience

Dates

Organisation

Position

Dates	Organisation	Position

### C5 Explanation as to why you are not eligible for approval under any of the other residence policies

  
  
  
  

Attach additional sheets if necessary

## Section D More Information and Advice

You can get more information and advice from:

- New Zealand diplomatic and consular offices.
- Any of our NZIS branch offices overseas. We have overseas offices in Apia, Bangkok, Beijing, Hong Kong, Jakarta, London, Moscow, New Delhi, Nuku'alofa, Shanghai, Singapore, Suva, Sydney, Taipei and The Hague
- Any of our NZIS branch offices in New Zealand, which are located in Auckland, Henderson, Manukau, Hamilton, Palmerston North, Wellington, Christchurch and Dunedin.

All NZIS forms, leaflets, and fee information can be downloaded from our website at: [www.immigration.govt.nz](http://www.immigration.govt.nz).

## Section E Advance Passenger Screening

- New Zealand has implemented a system designed to enhance the security of New Zealand's borders. You may be refused permission to board your flight to come to, or return to, New Zealand if:
  - you do not have an appropriate visa to enter New Zealand; or
  - your visa has expired; or
  - your visa has not been transferred to your current/new passport or the passport being used to enter New Zealand.
- To minimise any disruption to your travel plans please ensure your travel documents are up-to-date and that you have the appropriate and current visa. If you have any questions check [www.immigration.govt.nz](http://www.immigration.govt.nz)

# Section F Declaration

This part must be signed by the principal applicant and any partner and dependent children aged 17 years and over who are included in the application. Make sure you understand the declarations below before you sign them.

## Important

- 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 my visa or permit may later be revoked, and that I may also be committing an offence and liable to prosecution.
- I understand the notes and questions in this form and I declare the information given about myself, my partner and any children is true and complete.
- I declare that I have listed all my family members including any adopted by custom and my grandparents or legal guardians (if any) if both my parents are deceased, and understand that the non-declaration of any family members may result in that family member not being recognised as part of my family in future applications.
- I declare that I will inform the New Zealand Immigration Service (NZIS) of any relevant fact or any change of circumstances that may: (i) affect the decision on my application for a permit, or (ii) affect the decision to grant a permit in reliance 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 the New Zealand Immigration Service to make any enquiries it deems necessary in respect of the information provided on this form 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 also consent to any organisation providing relevant information to the NZIS about me.
- I authorise the NZIS 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 the NZIS.
- I accept that any advice given to me by the NZIS before lodging this application was intended to assist me and acting on that does not mean that my application for residence will be granted.
- 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 permit 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 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 the Ministry of Social Development if I apply for an emergency benefit.
- I understand that I am not entitled to an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship from the Ministry of Social Development for the first 24 months of my residence in New Zealand unless I can show that I am in hardship. I also understand that if I apply for an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship that I will need to show that I cannot support myself and my dependants before any application for emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship is considered. I understand that my application for an emergency benefit, unemployment benefit on grounds of hardship or sickness benefit on grounds of hardship may be declined if I have deprived myself of income or property, by gift or any other method.

Should my application be approved I agree to participate in an evaluation of the Business Immigration Policy categories for a period of up to 5 years after the approval of my application. I agree to inform NZIS of any changes to my postal/contact address within 5 years from the date of approval for the purpose of participating in the aforementioned evaluation.

Signature of principal applicant:

day	month	year

Signature of partner (if applicable):

day	month	year

Signature of parent or guardian if principal applicant is under 17 years of age:

day	month	year

Signatures of accompanying dependent children 17 years of age and over (if applicable):


day	month	year

## Section G Declaration for Person Assisting the Applicant to Complete this Form

To be completed and signed by any person who has assisted the applicant to complete this form by explaining, translating or filling in the form for the applicant.

Full name of person assisting:

Address of person assisting:

  

I certify that I have assisted in the completion of this form and any additional forms at the request of the applicant **and** that the applicant understood the content of the form(s) and agreed that the information provided is correct before signing the declaration. I have assisted the applicant as a:

lawyer  agent, consultant  translator  friend or family member  other advisor

Please specify:

I understand that after the applicant has signed this form it is an offence to alter or enter further information on it, alter any material attached to it, or attach any further material to it, unless the person making the alteration or addition states on the form what information or material has been altered or attached, why, and by whom. 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 7 years.

Signature of person assisting:

day	month	year

## Section H Privacy Act

The information about you and your family on this form is being collected so that your eligibility for residence in New Zealand can be properly determined and may also be used to contact you for research purposes or to advise you on immigration matters. This information may also be used to determine your entitlement to board a flight to come to, or return to New Zealand. Your personal information will not be shared with airline check in agents, however a boarding message will be returned to the airline check in agent based on information you have supplied on this form.

The main recipient of the information is the New Zealand Immigration Service of the Department of Labour but it may also be shared with other Government agencies which are entitled to this information under applicable legislation. In particular, the Ministry of Social Development Work and Income New Zealand may be given information about your personal resources.

The collection of the information is authorised by the Immigration Act 1987 and the Immigration Regulations made under that Act. The supply of the information is voluntary, but if you do not supply it then your application for residence is likely to be declined.

You will, if you come to New Zealand, have the right to see information about you held by the New Zealand Immigration Service and to ask for any of it to be corrected if you think that is necessary. The addresses of the New Zealand Immigration Service can be found in the **Self Assessment Guide for Residence in New Zealand** (NZIS 1003).



# Section I Fee Payment Details

I am paying (amount)  Currency  Application number

## Preferred methods of payment

Bank Cheque/Bank Draft  EFTPOS\*  Credit card or SWITCH

\* Note the EFTPOS option is not available if lodging application by mail

SWITCH card issue number (in UK only)

Credit card (specify type) Mastercard  Visa

Name of Cardholder  Card number  Expiry Date

CVC number

Signature of Cardholder  day month year

## The following methods of payment can be used but are not recommended for the noted reasons

- Personal Cheque Your application will be held for 10 working days to ensure the cheque has cleared before it will be processed
- Cash **Cash should not be sent through the mail for security reasons**

**Note:** • Money Orders are not an acceptable form of payment  
• Please see our leaflet ***New Zealand Immigration's Guide to Fees*** (NZIS 1028). All current fees and specific payment instructions for offshore branches can be found on the NZIS website at [www.immigration.govt.nz](http://www.immigration.govt.nz)

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## Collection Details

- I wish to collect my documents when ready. (**Note: This option is not available to applicants in the Auckland region.**)
- Please return all documents to me by "secure" post at the address given.

