

# VISITOR'S PERMIT APPLICATION FORM FOR USE BY AUCKLAND REGION APPLICANTS ONLY

This form is for use by VISITOR'S PERMIT applicants residing in the AUCKLAND REGION ONLY. If you do not live in the Auckland region or you are applying for a visitor's visa or Limited Purpose Visa or Permit please use the form *Application for Visiting New Zealand (NZIS 1017)*.

**Electronic renewals:** If you are the holder of a current Visitor's Permit and wish to extend your stay, you may choose to apply for a further Visitor Permit online by using NZIS Online Services. This service can be accessed using the NZIS website at [www.immigration.govt.nz](http://www.immigration.govt.nz) and following the on screen instructions for lodging your application.

**Please note:** if you are in New Zealand and applying for a further permit, you need to allow sufficient time for a decision to be made on your application before your current permit expires. If your permit does expire, your application for a further permit does not make your stay in New Zealand lawful or give you the right to remain in New Zealand while your application is being considered.

## IMPORTANT INFORMATION ABOUT THIS FORM

- Please ensure you have read the *Guide for Visiting New Zealand* (NZIS 1018) before completing this form and please read **ALL** information carefully to ensure the **correct** application form is being used.
- You do not need to supply your passport with this application. If the application is approved, an "approval letter" will be provided instead of a permit label. The approval letter may be used in exactly the same way in which a label would be used.
- To enable your application for a Visitor's Permit to be accepted you **MUST** submit **ALL** the documents that apply to you that are set out below. Failure to do so will result in the application being returned.
- We may request additional information to enable your application to be determined. You may also submit other information with this application that you wish to have considered but please do **NOT** submit **ORIGINALS** of the information as documents will **NOT** be returned to you. Please submit photocopies only. If we need to see an original document you will be asked to produce it at a later date.
- All documents must be in English or translated into English.

## 1. General Requirements

You must include the following **ORIGINAL** documents (unless otherwise stated). Where you are asked to provide **COPIES ONLY** you must do so as these documents will not be returned to you.

Applicant  
to tick

- a. A completed, signed application form.
- b. The application fee (see our leaflet *New Zealand Immigration's Guide to Fees* (NZIS 1028), or refer to our website [www.immigration.govt.nz](http://www.immigration.govt.nz)).
- c. A recent passport size photograph for each person included in this application attached to the form at the sections indicated.

**Please DO NOT send cash or other original evidence of funds or travel tickets with this application. Send COPIES ONLY of these items in the form of photocopies of traveller's cheques/bank draft/letters of credit or a bank statement in your name.**

- d. Evidence of your financial support while in New Zealand:
  - NZ\$1000 per person per month, **or**
  - NZ\$400 for each person for each month and evidence of prepaid accommodation, **or**
  - A completed *Sponsorship Form for Visiting New Zealand* (NZIS 1025), guaranteeing your accommodation and maintenance, from a New Zealand citizen/resident friend or relative who lives in New Zealand.

Office  
use only

- e. Evidence of onward travel from New Zealand:
  - A valid ticket to a country to which you have right of entry, **or**
  - A completed **Sponsorship Form for Visiting New Zealand** (NZIS 1025), guaranteeing your repatriation, from a New Zealand citizen/resident friend or relative who lives in new Zealand, **or**
  - Evidence of sufficient funds in New Zealand to purchase a ticket to a country to which you have the right of entry.

**PLEASE NOTE:** Any non-refundable travel arrangements are made at your own risk.

## 2. Category Specific Requirements

- Application for the purpose of a culturally arranged marriage (Section B of this form)**  
You must supply the evidence stated in B3 of this form.
- Legal guardians accompanying students in New Zealand**  
You must supply evidence that you are the legal guardian of the student you are accompanying.  
  
Please refer to the **Guide for Visiting New Zealand** (NZIS 1018) for more details, including the definition of Legal Guardianship.
- Other Special Visitor Categories**  
Please refer to the **Guide for Visiting New Zealand** (NZIS 1018) for additional requirements that will need to be submitted with your application.

## 3. Health Requirements

- a. People who intend to be in New Zealand for more than six months who are from a country, area or territory not listed as a low incidence tuberculosis (TB) country, area or territory or who have spent more than a total of three months in the past five years in a country, area or territory not listed as a low incidence TB country, area or territory must complete a **Temporary Entry X-ray Certificate** (NZIS 1096).
- b. People who intend to be in New Zealand for more than 12 months must complete a **Medical and Chest X-ray Certificate** (NZIS 1007).

Despite a. and b. above:

- Pregnant women and children under 11 years of age are not required to have an X-ray, unless a special report is required.

Please refer to the **Health Requirements Leaflet** (NZIS 1121) for more details on immigration health policy and a list of low incidence TB countries, areas and territories.

# Section A

# Personal Details

## Principal applicant

Client number:

**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** Passport details

Number:

Country:

Expiry Date:

  
day month year

**A9** Your citizenship

**A10** Other citizenships currently held

**A11** Partnership status Married  Never married  Partner  Separated   
Engaged  Widowed  Divorced

**A12** If you are applying for a visa/permit on the basis of a partnership:

- are you living in a genuine and stable partnership? Yes  No

If No please explain

  
  

- Will your partner be in New Zealand for the same period of time? Yes  No
- Do you meet the minimum requirements for the recognition of a partnership? Yes  No
- Do you intend to apply for residence under Partnership policy? Yes  No
- If Yes, will your New Zealand citizen or resident partner be eligible to sponsor your application? Yes  No

Attach one recent passport size photograph of yourself here. Write your name on the back.

## Additional information

Principal applicant, please complete for yourself and on behalf of any accompanying family members.

**A13**

I may be contacted at this New Zealand residential address and telephone number:

	Telephone

**A14**

Name and address of any friends, relatives or contacts I have in New Zealand are:

Name	Relationship
Address	
Name	Relationship
Address	
Name	Relationship
Address	

**A15**

Name and address for correspondence about this application:

	Telephone – day
	Telephone – night
	Fax
	Email

**A16**

If you have given the name and address of an agent in A15, do you authorise that agent to act on your behalf?

Yes  No

**A17**

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 email me instructions to register to check my application online.

**Please note: If you elect an agent to act on your behalf in question A16 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.

**A18**

My residential address in my home country is:


**A19**

List all periods of employment, including self-employment.

Date from (dd/mm/yyyy)	Date to (dd/mm/yyyy)	Name of employer	Location	Type of work/ occupation/ job title
/ /	/ /			
/ /	/ /			
/ /	/ /			
/ /	/ /			
/ /	/ /			
/ /	/ /			

**A20**

I am employed by, and my regular occupation is:  
(Please give name and address of employer. If not employed, please state this.)

Employer details:

Your occupation:

**A21**

My stay in New Zealand will be financially supported in the following way:

**A22**

The arrangement I have made for outward travel from New Zealand is:

If requested, please attach a copy of your travel itinerary or air ticket out of New Zealand.

## Principal Applicant: Application Details

**A23**

I am applying for a Visitor's Permit to be in New Zealand, or

I am applying for a Visitor's Permit and a single/multiple  
Visitor's Visa to re-enter New Zealand on

day month year

**A24**

This is the date I arrived in New Zealand:

day month year

This is the date I request my **Visitor's Permit** be valid to:

day month year

This is the date I will finally depart New Zealand:

day month year

**A25**

Please state the purpose for staying longer in New Zealand

If you wish to apply to study or work in New Zealand please use a study or work application form.

## Section B

## Application for the Purpose of a Culturally Arranged Marriage

Complete this section ONLY if you are applying for a permit for the purpose of culturally arranged marriage.

**B1**

Are you in New Zealand for the purpose of entering a marriage in accordance with an identified cultural tradition where the arrangements for the marriage, including the initial selection of the persons to be married, are made by persons who are not parties to the marriage?

Yes  No

**B2**

Do you intend to marry within 3 months of your arrival in New Zealand?

Yes  No

**B3**

Please mark the box to confirm you have supplied the following items:

Evidence that the person you intend to marry is a New Zealand citizen or resident; and

Evidence that the New Zealand citizen or resident you intend to marry:

supports your application in writing; and

is eligible to sponsor your application

Evidence that there is no legal impediment to the intended marriage; and

Evidence that the marriage follows an identified cultural tradition; and

Evidence that you and the New Zealand citizen or resident you intend to marry comply with the minimum requirements for the recognition of partnership.

# Section C

# Family Details

## Partner

**C1** Name as shown in passport  
Family:  Given:

**C2** Preferred title Mr  Mrs  Ms  Miss  Dr  other   
(please specify)

**C3** Other names they are known by

**C4** Name in ethnic script

**C5** Gender Male  Female  **C6** Date of birth   
day month year

**C7** Place and country of birth Place:  Country:

**C8** Your citizenship

**C9** Passport details Number:  Country:

**C10** Other citizenships currently held

**C11** Is your partner included in this application? Yes  No

Attach one recent passport size photograph.  
Write name on back.

## Dependent Children

**C12** Supply the following details for each dependent child included in this application:  
Child's name as shown in passport  
Family:  Given:

Attach one recent passport size photograph.  
Write name on back.

**C13** Male  Female

**C14** Date of birth   
day month year

**C15** Country of birth

**C16** Passport number

**C17** Country of citizenship

**C18** Other citizenships currently held

**C19** Child's name as shown in passport  
Family:  Given:

Attach one recent passport size photograph.  
Write name on back.

**C20** Male  Female

**C21** Date of birth   
day month year

**C22** Country of birth

**C23** Passport number

**C24** Country of citizenship

**C25** Other citizenships currently held

Dependent Child 1

Dependent Child 2

**C26** Child's name as shown in passport

Family:

Given:

Attach one recent passport size photograph. Write name on back.

**C27** Male  Female

**C29** Country of birth

**C30** Passport number

**C31** Country of citizenship

**C32** Other citizenships currently held

**C28** Date of birth     
day month year

**C33** Child's name as shown in passport

Family:

Given:

Attach one recent passport size photograph. Write name on back.

**C34** Male  Female

**C36** Country of birth

**C37** Passport number

**C38** Country of citizenship

**C39** Other citizenships currently held

**C35** Date of birth     
day month year

## Section D

## Additional Details

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

**D1** Do you or any person included in this application 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

**D2** Have you or any person included in this application 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) that 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

**D3** Are you or any person included in this application presently subject to military service obligations in any country? Yes  No

If No, and you or any person included in this application are a citizen of a country in which compulsory military service exists, state below why you are exempt from military service.


**D4** Have you or any person included in this application been associated with any intelligence agency or group, or law enforcement agency? Yes  No

If Yes, please specify:


**D5** Have you or any person included in this application been associated with any group or organisation that has engaged in or promoted the use of violence to further their aims? Yes  No

If Yes, please specify:


**D6** Have you or any person included in this application 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:


# Section E

# Character Details

Have you or any person included in this application been:

- convicted
- charged
- under investigation

Yes  No

Yes  No

Yes  No

for any offence(s) against the law in any country; or

- deported
- excluded (refused entry)
- removed

Yes  No

Yes  No

Yes  No

from any country?

If you have marked **Yes** to any of the above, please provide details below:


# Section F

# Health Details

**F1** Are you, or any person included in the application, pregnant? Yes  No

**F2** Do you, or any person included in the application have:  
• Pulmonary Tuberculosis (TB)? Yes  No

Do you, or any person included in the application, have any medical condition(s) that currently requires, or may require during your stay in New Zealand:

- Renal dialysis? Yes  No
- Hospitalisation? Yes  No
- Residential care?\* Yes  No

\*Residential care is long-term care provided in a live-in facility such as an aged person's facility or a facility for people with a physical, sensory, intellectual or psychiatric disability.

**F3** If you have answered **Yes** to any of the above questions, please provide details below:


**F4** I have read the **Health Requirements Leaflet** (NZIS 1121) and I am aware of the health information I need to provide with this application. Yes  No

**F5** Are you, or any person included in this application from a country that is **not** on the list of low incidence TB countries? Yes  No

**F6** Have you, or any person included in this application spent three months or more in the past five years in a country that is **not** on the list of low incidence TB countries? Yes  No

**F7** If you have answered **Yes** to F5 or F6, please provide details below. For a list of low incidence TB countries, refer to the **Health Requirements Leaflet** (NZIS 1121).


**F8** How long do you or any person included in this application intend to visit New Zealand?

**F9** Have you or any person included in this application submitted a medical certificate with another New Zealand Immigration application in the past 24 months? Yes  (go to question F10)  
No  (go to question F11)

**F10** Please provide details of the type(s) and date(s) of the previous application(s):

Type of application(s):  Date(s) of application(s):      
day month year

**We will advise you if we need you to submit further information, such as tests, reports or a new certificate at a later date.**

**F11** Have you attached a completed *Temporary Entry Chest X-ray Certificate* (NZIS 1096)? Yes  No

OR

**F12** Have you attached a completed *Medical and Chest X-ray Certificate* (NZIS 1007)? Yes  No

**Please note:** All immigration visa and permit holders who access health services in New Zealand should carry a current passport to enable health providers to document eligibility status. We strongly recommend that you have comprehensive health insurance for the duration of your visit. For more information visit the Ministry of Health website at [www.moh.govt.nz](http://www.moh.govt.nz)

## Section G Declaration

I understand the questions and contents of this form, and the information I have provided is true and correct.

I understand that if, between the time that I make this application and the time it is decided, any relevant matter relating to the application changes, I am obliged to inform the NZIS.

I understand I am responsible for making sure I leave New Zealand before my permit expires and that if I do not I may face removal action.

Residents and people holding work permits for a stay of two years or more (and their dependent children) are eligible for publicly funded health and disability services. Other work permit holders, students, and visitor permit holders generally are not eligible. People covered by New Zealand's Reciprocal Health Agreements with Australia and the UK are entitled to publicly funded health care for immediately necessary medical treatment only. I understand that if not entitled to free treatment, I will pay for any health care or medical assistance I or any person included in my application may require in New Zealand.

I authorise 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 authorise NZIS to make any enquiries it considers necessary in respect of information provided on this form in order to make a decision on this application and enquiries about my subsequent immigration status. I authorise any agency which holds information (including personal information) relevant to those matters to disclose that information to NZIS.

If granted a permit as a legal guardian accompanying a student, I understand it is a condition of the permit that I live with the student I am accompanying. I understand that my permit and the permit of the student I am accompanying may be revoked if this condition is breached.

Signature of principal applicant

day month year

Signature of partner

day month year

Signature of dependent child

day month year

Signature of dependent child

day month year

Signature of dependent child

day month year

Note: a parent or guardian may sign on behalf of any children aged under 17 years.



The information about you on this form is collected to determine your eligibility for a Visitor's Permit 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, or with other agencies in accordance with an authority in the form.

The address of the New Zealand Immigration Service is PO Box 3705, Wellington, New Zealand. **This is not where your application should be sent.**

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 is likely to be declined.

You have a right to access the 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.

## Section J

## More Information and Advice

Your application should be sent to:

PO Box 76895,  
Auckland Mail Centre  
Auckland

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

You can get more information and advice from:

- The National Contact Centre: Central Auckland 24 hour telephone service for New Zealand Immigration Service customers 09 914 4100

## Section K

## 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 L

# 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

C.V.C. 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)

