



EXPATRIATES UNIT LONG TERM RESIDENTS RESIDENCE APPLICATION FORM

(To be filled in by persons who are not nationals of an EU Member State, Iceland, Liechtenstein, Norway or Switzerland)
Status of Long-Term Residence (S.L. 217.05) Third Country Nationals Regulations.

01 APPLICANT'S PERSONAL DETAILS

Residence Permit No.	<input type="text"/>															A														
Date of Issue	<input type="text"/>	Valid Until	<input type="text"/>																											
Surname	<input type="text"/>																													
Name	<input type="text"/>																													
Maiden Surname <small>(If applicable)</small>	<input type="text"/>																													
Current Nationality	<input type="text"/>																													
Nationality at Birth	<input type="text"/>																													
Country of Birth	<input type="text"/>																													
Place of Birth	<input type="text"/>																													
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Cohabitant																													
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other																													
Date of Birth	<input type="text"/>																													
Telephone No.	<input type="text"/>																													
Mobile No.	<input type="text"/>																													
Email Address	<input type="text"/>																													
Travel Document Type	<input type="checkbox"/> Passport <input type="checkbox"/> Foreign ID <input type="checkbox"/> Other (Specify)															<input type="text"/>														
Travel Document No.	<input type="text"/>																													
Country of Issue	<input type="text"/>																													
Date of Issue	<input type="text"/>	Valid Until	<input type="text"/>																											
Period of time that will be spent residing in Malta during each calendar year within the validity of the permit	<input type="text"/>															days / months														

05 DECLARATION BY THE LANDLORD

I, hereby, declare that the applicant, whose details are shown above, is residing in the address shown in SECTION 01 of the application form, which is owned or managed by the undersigned. I also declare that I will notify Identità should the applicant cease to continue residing at this address.

Name of landlord (IN BLOCK LETTERS)	
ID Card No.	
Mobile No.	
Number of Persons Residing in this Residence	
Address of Landlord	
	Post Code
Email Address	

Landlord's Signature

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

Date

CHECKLIST FOR A NEW APPLICATION

The applicant must submit the following documentary evidence in support of his request to be granted long-term resident status:

- A covering letter explaining:
 - (i) the intentions of the applicant to apply for the long-term resident status; and
 - (ii) the background of the applicant in Malta, including:
 - (a) accurate information on the applicant's first settlement in Malta,
 - (b) the nature of the stay throughout the years, and
 - (iii) the existence of any family members.
- Chronological list of dates of arrivals and departures from the territory of the European Union;
- Full copies of the passport/s used in the last five years prior to the submission of the application;
- Proof of effective residence in Malta for the last five years prior to the submission of the application;
- Tax declarations of the last two years prior to the submission of the application, confirming that the applicant has stable and regular resources which are equivalent to, at least, the minimum wage in Malta with an addition of another twenty percent of the national minimum wage for each additional member of the family;
- A certificate by a warranted architect confirming that the applicant's accommodation is regarded as normal for a comparable family in Malta and meets the standards established by the Housing Authority.
- Lease agreement signed by both landlord and tenant, which must include the full name, ID Card number of landlord, rental address. The name of the tenant must match the name on the passport. If the landlord is not Maltese, a purchase agreement of the same premises must be presented;
- A copy of the approval letter issued by the Housing Authority for the registration of property as a rental as per Chapter 604 of the Laws of Malta;
- Evidence of sickness insurance covering the applicant and all the related family members, or proof of an exemption issued by the Entitlement Unit;
- Evidence of complete integration measures, specifically:
 - i.** I Belong course provided by the Human Rights and Integration Directorate: confirmation of at least 100 hours of attendance and the achievement of an examination pass mark of at least 75%, obtained at most 12 months before the date of application;
 - ii.** A pass mark of at least 65% in MQF Level 2 Maltese language certificate;
 - iii.** Documentation showing that the relevant course fees have been paid.

CHECKLIST FOR RENEWAL APPLICATION OF STATUS

In order to apply for an updated residence document the status holder will need to submit the following documents:

- Full copies of the passport/s used in the last five years prior to the submission of the application;
- Declaration and sufficient proof by the applicant confirming the following:
 - a) That the applicant has not been absent from the territory of the European Union for a period of twelve (12) consecutive months;
 - b) That the applicant has not acquired long-term resident status in another Member State;
 - c) That the applicant has not been absent for six (6) years from Malta and is residing in another Member State.
- Application fee of €137.50.

NOTES TO APPLICANTS

The expiry of the long-term resident's EU residence permit does not entail the withdrawal or loss of the long-term resident status. The residence permit would be issued for a period of five (5) years and is subject to renewal.

The application must include all the requested information, contact details, dates and signatures. All documentation must be presented in original format. The Agency will retain a copy of the original documents.

Documents in a foreign language must be translated to Maltese or English by a translator registered with the Maltese authorities.

Identità will issue a decision on the application within a period which does not exceed six months.

Should an applicant who, at date of application, is exempt from paying hospital fees due to such applicant paying the prescribed contribution under the Social Security Act, be no longer considered exempt, such applicant would need to obtain sickness insurance in respect of all risks normally covered for Maltese nationals for himself and the members of his family.

IDENTITÀ

Triq il-Wied, L-Imsida, MSD 9020, MALTA

T +356 2590 4000

W www.identita.gov.mt

E enquiries.identita@gov.mt

EXPATRIATES UNIT

Triq il-Wied, L-Imsida, MSD 9020, MALTA

T (+356) 2590 4800

W www.identita.gov.mt

E noneu.identita@gov.mt