



REPUBLIC OF PALAU
MINISTRY OF JUSTICE
BUREAU OF IMMIGRATION
P.O BOX 6067 KOROR, PW 96940
TEL: (680) 488-2498/2678 FAX: (680) 488-4385
Email: imm@palaunet.com



APPLICATION FOR A PERMIT TO ENTER AND WORK AS AN INVESTOR

1. Full Name: _____
Last First Middle

Dependents of accompanied: _____

2. Date of Birth: Investor: _____ Spouse: _____

3. Country of Birth: Investor: _____ Spouse: _____

4. Citizenship: Investor: _____ Spouse: _____

5. Residential Address: _____

6. Martial Status: _____ Single _____ Married _____ Divorced _____ Separated _____ Widow

7. Passport Number: _____ Social Security Number: _____

8. Nature of Business or Investment in the Republic of Palau:

9. Name of Title or Business: _____

10. Address of Business: _____

11. Contact number(s): Home: _____ Mobile: _____ Work: _____

12. Attach copy of FIB/FIAC Terms and Conditions.

13. Have you ever applied for Republic of Palau entry permit before? _____ YES _____ NO

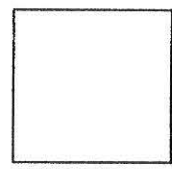
If yes, when and what type of Permit/Visa: _____

Was the Permit/Visa: _____ Granted _____ Denied _____ Revoked

If granted, what is the entry permit number _____ Date of Expiration: _____

14. Provide the Following:

- a) Police Clearance from applicant's place of residence.
- b) Sworn statement from the applicant that he or she has not been convicted of a felony.
- c) Medical examination report.
- d) Proof of financial responsibility.
- e) Two recent photographs size 1" x 1".
- f) Statement of the purpose of the presence of the alien in the Republic.
- g) Any other information that the applicant may wish to provide that such a visa will be in the best interest of the Republic.
- h) Applicant must hold at least 25% equity interest. Approved by FIB/FIAC:
- i) Copy of Passport.



Signature of Applicant

Date

Jenkins Mariur
Director of Immigration

Date

FOR OFFICIAL USE ONLY

PERMIT # _____ ISSUE DATE: _____ EXPIRATION DATE: _____