



**NEW RESIDENCY VISA - SELF-FUNDED CHECKLIST**

Applicant(s) Full Name(s): .....

Nationality: .....

Residential Address in Vanuatu: .....

#	Description	Check
1	Application form dully completed	<input type="checkbox"/>
2	Copy of Valid Passport (Validity more than 6 months)	<input type="checkbox"/>
3	2 recent ID Photos	<input type="checkbox"/>
4	Receipt for Payment of Associated Fees – <b>(57,600 vatu)</b>	<input type="checkbox"/>
5	Recent Police Clearance from Country of Origin (Nationality)	<input type="checkbox"/>
6	Recent Medical Certificate	<input type="checkbox"/>
7	Immigration Bond <b>(at National Bank of Vanuatu (NBV))</b> <b>Account Name: IMMIGRATION BOND ACCOUNT</b> <b>Account Number: 0104697002</b>	<input type="checkbox"/>
8	Evidence of monthly income of 250,000vt certified by Local Bank	<input type="checkbox"/>
9	Is the person inside the Country? <input type="checkbox"/> YES <input type="checkbox"/> NO	
	*If Yes, needs to pay for change of status- <b>(100,000 vatu)</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	
	*If yes for above, provide receipt for payment of change of status	<input type="checkbox"/>

**IMPORTANT: if any of the above is not provided, application will be rejected**

Submitted by: .....

Date received: ..... / ..... / .....

Signature:

Front Desk Officer: .....

Date received: ...../...../.....

Signature:

Name of Visa Officer: .....

Date received: ..... / ..... / .....

Signature:

**DÉPARTMENT DE L'IMMIGRATION**

Services de L'Immigration et de Passeport de Vanuatu  
Autoroute Kumul, Tamarama Building  
Tél: (678) 22 354 / (+678) 33125  
Email: [visqueries@vanuatu.gov.vu](mailto:visqueries@vanuatu.gov.vu)  
Web: [www.immigration.gov.vu](http://www.immigration.gov.vu)  
P.O.Box 9092, Port-Vila, Vanuatu



**IMMIGRATION DEPARTMENT**

Vanuatu Immigration and Passport Services  
Kumul Highway, Tamarama Building  
Tel: (678) 22 354 / (+678) 33125  
Email: [visqueries@vanuatu.gov.vu](mailto:visqueries@vanuatu.gov.vu)  
Web: [www.immigration.gov.vu](http://www.immigration.gov.vu)  
P.O.Box 9092, Port Vila, Vanuatu

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<b>COMPLIANCE DUE DILIGENCE AND AUTHENTICITY CLEARANCE</b>		
POLICE CLEARANCE CASHIER JUDICIAIRE		
STATUS FROM BORDER ALERT SYSTEM		
VALIDITY OF PASSPORT (AT LEAST 6 MONTHS)		
PI LIST ALERT		
GENERAL REMARKS		

Name of Compliance Officer: .....

Date received: ..... / ..... / .....

DUE DILIGENCE CHECK COMPLETE?  YES  NO

Signature: