

## IMMIGRATION REGULATIONS, 2014

### Published under

GN R413 in GG 37679 of 22 May 2014  
[with effect from 26 May 2014]

### as amended by

GN R1328 in GG 42071 of 29 November 2018  
[with effect from 1 December 2018]

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NO.	DESCRIPTION	
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<b>NO.</b>	<b>DESCRIPTION</b>	
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**FORM 1**  
**NOTIFICATION REGARDING RIGHT TO REQUEST REVIEW BY MINISTER**

(DHA-1756) **Form 1**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**NOTIFICATION REGARDING RIGHT TO REQUEST REVIEW BY MINISTER**  
**[Section 8(1); Regulation 7(1)]**

**\*Part A****In respect of a person refused admission at a port of entry:**

To: ..... (name(s) and surname).

Passport No ..... Nationality .....

Date of birth ..... Age ..... Gender.....

In accordance with section 8(1) of the Act, you are hereby notified that you may request the Minister to review the decision. However, if the conveyance you arrived on is on the point of departing, you shall lodge a request for review immediately and depart and await the outcome thereof outside the Republic.

The conveyor responsible for your conveyance to the Republic, namely ..... (name and Flight No./Vessel Registration No.) is liable for the costs of your detention, maintenance and removal from the Republic.

**\* Part B****In respect of a person found to be an illegal foreigner:**

To ..... (name(s) and surname).

Passport No..... Nationality.....

Date of birth.....

In terms of section 8(1) of the Act, you are hereby notified that you may, within three days from date of this date notice, request the Minister to review the decision to deport you.

.....  
Signature of immigration officer.....  
Place.....  
Date**IMMIGRATION OFFICER'S PARTICULARS**

Name and Surname:.....

Appointment number:.....

Rank/position:.....

**ACKNOWLEDGEMENT OF RECEIPT**

I acknowledge receipt of the original of this notice and understand the content thereof.

I\*\* intend/do not intend to request a review of this decision.

My written request \* is attached/will be submitted within three days.

.....  
Signature of affected person.....  
Place.....  
Date

\*Delete Part A or B, which[ever] is not applicable

\*\*Delete which[ever] is not applicable

## CERTIFICATE BY INTERPRETER

I,.....(*name(s) and surname*)  
of.....(*business name and*  
*address*) and ..... (*residential address*) with telephone  
number..... and cell number.....hereby  
confirm that I have mastered .....(*state language*) and that I have explained to  
.....(*name(s) and surname of foreigner*) the contents of this notice in the said  
language and that I am satisfied that the said foreigner fully understands it.

.....  
**Signature of interpreter**.....  
**Place**.....  
**Date**

**FORM 2**  
**NOTICE OF DECISION ADVERSELY AFFECTING RIGHT OF PERSON**

(DHA-1714A) **Form 2**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**NOTICE OF DECISION ADVERSELY AFFECTING RIGHT OF PERSON**  
**[Section 9, read with section 8(3); Regulation 6]**

**\*Part A:**  
**In relation to port of entry**

To: .....  
 Passport No: ..... Visa No. (where applicable):.....  
 With reference to..... you are, in accordance with  
 the provisions of section 8(3) of the Act, hereby, notified that the decision is as follows:

.....  
 .....

The reason(s) for the decision is/are the following:

.....  
 .....

You may, within 10 working days from date of receipt of this notice, make written representations to the Director-General through the South African Embassy in the country of your residence or citizenship to review this decision.

It is your responsibility to enquire about the outcome of your representations.

.....  
**Signature**

.....  
**Place**

.....  
**Date**

.....  
**Appointment number**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position .....

Port of entry:.....Province:.....

**ACKNOWLEDGEMENT OF RECEIPT**

I acknowledge receipt of the original of this notice and declare that I understand its content.

I \*intend /do not intend to make representations to the Department in terms of section 8(4) of the Act to review the decision.

Written representations \*are attached/will be submitted within 10 working days.

.....  
**Signature of recipient of notice**

.....  
**Date**

**\*Delete which is not applicable**

### CERTIFICATE BY INTERPRETER

I,.....(name(s) and surname)  
 of.....(business name and  
 address) and ..... (residential address) with telephone  
 number..... and cell number.....hereby  
 confirm that I have mastered .....(state language) and that I have explained to  
 .....(name(s) and surname of foreigner) the contents of this notice in the said  
 language and that I am satisfied that the said foreigner fully understands it.

.....  
**Signature of interpreter**

.....  
**Place**

.....  
**Date**

(DHA-1714A) **Form 2**



**DEPARTMENT OF HOME AFFAIRS  
 REPUBLIC OF SOUTH AFRICA  
 NOTICE OF DECISION ADVERSELY AFFECTING RIGHT OF PERSON  
 [Section 10, read with section 8(3); Regulation 7(2)]**

**\*Part B:  
 In relation to permitting**

Ref No.

To: .....

.....

.....

.....

With reference to your application for a.....

dated.....you are, in terms of the provisions of section 8(3) of the Act, hereby, notified that  
 the decision is as follows:

**REFUSED**

The reason(s) for the decision is/are the following:

.....  
 .....  
 .....  
 .....  
 .....  
 .....  
 .....

You may, within 10 working days from date of receipt of this notice, make written representations to the  
 Director-General to review the decision.

Should you fail to make representations, or fail to keep the Department informed of your whereabouts, the  
 decision set out above shall remain effective. It is your responsibility to enquire about the outcome of your  
 representations within 30 days after submission thereof.

.....  
**Signature**

.....  
**Appointment number** (in the case of an immigration officer)

.....  
**Place**

.....  
**Date**

I acknowledge receipt of the original of this notice and declare that I understand its content.  
 I \*intend /do not intend to make representations to the Department in terms of section 8(2) of the Act to review the decision.  
 Written representations \*are attached/will be submitted within 10 working days.

.....  
**Signature of recipient of notice**

.....  
**Date**

**\*Delete which is not applicable**

**CERTIFICATE BY INTERPRETER**

I, ..... (first(name(s) and surname)  
 of ..... (Business/residential  
 address) hereby confirm that I have mastered ..... (state language) and that I  
 have explained to ..... the contents of this notice in the said language and that  
 I am satisfied that the said detainee fully understands it.  
 Signed at ..... on this ..... day of ..... 20.....

.....  
**Signature of interpreter**

(DHA-1714A) **Form 2**



**DEPARTMENT OF HOME AFFAIRS  
 REPUBLIC OF SOUTH AFRICA  
 NOTICE OF DECISION ADVERSELY AFFECTING RIGHT OF PERSON  
 [Section 7(1)(g) read with section 8(3); Regulation 7(2)]**

**\*Part C:  
 In relation to Inspectorate**

To: .....

At: .....

With reference to ..... you are, in terms of the  
 provisions of section 8(3) of the Act, hereby, notified that the decision is as follows:

.....  
 .....  
 .....

The reason(s) for the decision is/are the following:

.....  
 .....  
 .....  
 .....  
 .....

You may, within 10 working days from date of receipt of this notice, make written representations to the  
 Director-General to review the decision.

.....  
**Signature**

.....  
**Appointment number** (in the case of an immigration officer)

.....  
**Place**

.....  
**Date**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname: .....



Appointment number:.....  
 Rank/position:.....  
 Office:.....  
 Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....  
 Rank/position:.....  
 Contact No.: Tel:.....

I acknowledge receipt of the original of this notice and declare that I understand its content.

I \*intend /do not intend to make representations to the Department in terms of section 8(2) of the Act to review the decision.

Written representations \*are attached / will be submitted within 10 working days.

.....  
**Signature of recipient of notice**

.....  
**Date**

**\*Delete which is not applicable**

**CERTIFICATE BY INTERPRETER**

I,..... (*first(name(s) and surname*)  
 of..... (*Business/residential address*) hereby confirm that  
 I have mastered ..... (*state language*) and that I have explained to  
 ..... the contents of this notice in the said language and that I am satisfied that  
 the said detainee fully understands it.

Signed at.....on this.....day of .....20.....

.....  
**Signature of interpreter**

**FORM 3**  
**APPLICATION FOR EXEMPTION TO ENTER OR DEPART AT PLACE OTHER THAN**  
**PORT OF ENTRY**

(DHA-26) Form 3



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**

**APPLICATION FOR EXEMPTION TO ENTER OR DEPART AT PLACE OTHER THAN PORT OF ENTRY**  
**[Section 7(1)(g) read with section 9(3)(b); Regulation 6(1)]**

See reverse side for conditions

Nationality of passport				Passport or travel document No			
Surname				First name(s) in full			
Date of birth	Year	Month	Day	Country of normal residence			
Permanent Residence Permit No (where applicable)*						Date issued	
Visa for Temporary Sojourn (where applicable) valid until*						For purposes of	
<b>Application is hereby made for exemption to enter/exit the Republic at a place other than a port of entry</b>							
Where entry/exit is required							
Motive why exemption is required							
Period of exemption required				From To			
Purpose of exemption							
I have taken note of the conditions on the reverse side hereof							
Date					Signature		

**FOR OFFICIAL USE ONLY****APPLICATION FOR APPROVED/REFUSED**

Valid until:

Reasons for decision

File No		permission granted i.t.o section	
Place		Immigration Officer	
Date		Appointment/Service No.	

**CONDITIONS**

Exemption to enter/depart the Republic at a place other than a port of entry may only be issued to South African citizens, foreigners exempt in terms of section 31 or foreigners in possession of a relevant and valid visa for temporary or permanent sojourn commensurate with the purpose of visit indicated on this application.

This exemption is a privilege and not a right and can therefore be withdrawn at any time.

The exemption is specifically for the purpose applied for and does not exempt the holder from other entry requirements of the Republic, e.g. valid passport, visa, sufficient funds, etc. If the exemption is granted, it shall be produced on demand by an immigration officer, police officer, Customs officer or a member of the South African National Defence Force in the execution of border control duties, together with your passport and/or any other document relevant to entry or residence in respect of the Republic.

Only the holder of the exemption is authorised as indicated thereon and all persons accompanying him or her shall comply with the normal entry requirements in their own right.

The exemption does not exempt the holder from any requirement of another country involved when crossing the common border of the Republic with such country.

Proof of right to return to country of nationality and/or residence may be required from an applicant who is a foreigner.

## FORM 4 TRAVELLER CARD

<b>Traveller Card - Republic of South Africa</b>		<b>DHA-CTC 01</b>
This declaration must be completed by all travellers who enter or leave the Republic of South Africa in terms of the Immigration Act No. 13, Sections 7(1)(g) read with Section 9(3)(e); Regulation 6(3)(d), and the Customs & Excise Act No.91 of 1964. Please retain your completed declaration, unless instructed otherwise by Immigration.		
Surname	<input style="width: 100%;" type="text"/>	
First Name(s)	<input style="width: 100%;" type="text"/>	
Nationality	<input style="width: 100%;" type="text"/>	Date of Birth (CCYYMMDD) <input style="width: 100%;" type="text"/>
Passport No.	<input style="width: 100%;" type="text"/>	
Flight No. / Ship No. / Vehicle Reg No	<input style="width: 100%;" type="text"/>	
<b>Reason for Visit:</b>		
<input type="checkbox"/> Resident	<input type="checkbox"/> Immigrant	<input type="checkbox"/> Study
<input type="checkbox"/> Resident	<input type="checkbox"/> Employment	<input type="checkbox"/> Crew
<input type="checkbox"/> Business		<input type="checkbox"/> Transit
<input type="checkbox"/> Holiday		<input type="checkbox"/> Other (specify) <input style="width: 100%;" type="text"/>
Country of normal residence	<input style="width: 100%;" type="text"/>	
Period of intended stay	<input style="width: 100%;" type="text"/>	
<b>Occupation:</b>		
<input type="checkbox"/> Civil Service	<input type="checkbox"/> Diplomat	<input type="checkbox"/> Military / Police
<input type="checkbox"/> Education	<input type="checkbox"/> Professional	<input type="checkbox"/> Trade / Business
<input type="checkbox"/> Media		<input type="checkbox"/> Artist
<input type="checkbox"/> Charity		<input type="checkbox"/> Student
<input type="checkbox"/> Other (specify) <input style="width: 100%;" type="text"/>		
<b>Are you in Possession of:</b>		
Any prohibited or restricted goods?	<input type="checkbox"/> Y <input type="checkbox"/> N	Any goods in excess of Duty Free Allowances (DFA)? <input type="checkbox"/> Y <input type="checkbox"/> N
Any good intended for trade?	<input type="checkbox"/> Y <input type="checkbox"/> N	Foreign or ZAR Currency exceeding limits? <input type="checkbox"/> Y <input type="checkbox"/> N
Any valuable goods that you need to register for temporary importation/exportation?		<input type="checkbox"/> Y <input type="checkbox"/> N
<b>Physical Address in South Africa:</b>		
Unit No. <input style="width: 100%;" type="text"/>	Street Name <input style="width: 100%;" type="text"/>	
Hotel / Complex / Name of Farm	<input style="width: 100%;" type="text"/>	
Suburb / District	<input style="width: 100%;" type="text"/>	
City / Town	<input style="width: 100%;" type="text"/>	Postal Code <input style="width: 100%;" type="text"/>
Intended Date of Departure from address (CCYYMMDD)		<input style="width: 100%;" type="text"/>
Contact No. in RSA	<input style="width: 100%;" type="text"/>	
Contact Person in RSA	<input style="width: 100%;" type="text"/>	
<b>Declaration:</b>		
I <input style="width: 100%;" type="text"/> , hereby declare that the particulars herein are true and correct.		SIGNATURE <input style="width: 100%;" type="text"/>
For Office Use <input style="width: 100%;" type="text"/>	Date (CCYYMMDD) <input style="width: 100%;" type="text"/>	

**Upon arrival or departure in / from South Africa ALL goods must be declared**

- This declaration must be completed with a black / blue pen in English using capital letters
- Parents or guardians should assist minors to complete the Traveller Card
- Each traveller (or legal guardian in the case of minors) must sign the Traveller Card
- Only the original Traveller Card may be submitted to the Immigration Officer
- After Immigration proceed to either the RED or GREEN channel

**Import of the following goods into South Africa is strictly PROHIBITED:**

Narcotics and habit-forming drugs



Cigarettes of which the mass exceeds 2kg per 1 000



Fully automatic, military and unnumbered weapons



Trade description or trademark in contravention of any legislative requirements



Explosives and fireworks



Unlawful reproductions of any work subject to copyright



Poison and toxic substances



Penitentiary or prison-made goods

**RESTRICTED goods may be imported if you are in possession of the necessary authority or permit. Examples include:**

Firearms



Animals, plants and their products



All gold coins or RSA banknotes or bearer instruments in excess of R25 000 or foreign currency exceeding US\$10 000 or equivalent



Medicine



Unprocessed minerals



Herbal products

**The following goods may be imported in terms of duty- and tax-free ALLOWANCES to a maximum of:**

Wine – 2 litres



Pipe or cigarette tobacco – 250 grams



Other alcoholic beverages – 1 litre



Cigarettes – 200



Accompanied baggage – new or used goods up to R5 000



Cigars – 20



Up to 50ml Perfume and 250ml eau de toilette

- A traveller is entitled to these allowances once per person during a period of 30 days after an absence of 48 hours from South Africa
- The tobacco and alcohol allowance is not applicable to persons under the age of 18 years
- Crew members are not entitled to any consumable allowances

- Personal effects and/or sporting and recreational equipment are duty and tax free if brought in by:
  - Visitors for own use and if goods do not remain in South Africa
  - Returning residents where such goods can be identified as the same goods that were taken abroad
- Goods in excess of allowances may attract Customs duty and/or VAT
- Failure to declare any goods, the under-declaration of value or the production of false receipts can lead to seizure of goods, criminal prosecution and imposition of severe penalties

**FORM 5**  
**DECLARATION BY FOREIGNER SEEKING ADMISSION**

(DHA-1565) **Form 5**

**DEPARTMENT OF HOME AFFAIR**  
**REPUBLIC OF SOUTH AFRICA**  
**DECLARATION BY FOREIGNER SEEKING ADMISSION**  
**[Section 7(1)(g) read with section 9(3)(e); Regulation 6(4)]**

Surname:.....  
 First name:.....  
 Date of birth:...../...../.....  
 Place of birth (town/city):.....Country of birth:.....  
 Marital status:.....Nationality:.....  
 Country of permanent residence:.....  
 Country which issued passport / travel document:.....  
 Passport/travel document no..... issued at (place).....  
 on.....(date) and valid until .....(date).  
 Place and date of arrival in the Republic:.....  
 Occupation/profession (describe in full).....  
 Purpose of visit (must be described in full and in the case of commercial activities, the nature thereof must also be described).....  
 Duration of intended stay in the Republic (intended date of departure).....  
 Address in Republic:.....  
 Have you ever been refused a visa for or admission to, deported from or instructed to leave the Republic?  
 .....(Yes/No). If yes, furnish details.....  
 I declare that the information I have furnished above is true and correct and that if I am admitted to the Republic, I will comply with the purpose and conditions of my permit.

LEFT THUMBPRINT

.....  
**Signature of deponent**.....  
**Place**.....  
**Date****CERTIFICATE BY INTERPRETER**

I ..... (first name(s) and surname) of

.....  
 (business/residential address) hereby confirm that I have mastered ..... (state language)  
 and that I have explained to ..... [first name and surname of detainee] the contents of  
 this notice in the said language and that I am satisfied that the said detainee fully understands it.

Signed at ..... on this ..... day of ..... 20.....

.....  
**Signature of interpreter**

**FORM 6**  
**INTERVIEW BY IMMIGRATION OFFICER OF PERSON NOT HAVING SATISFIED**  
**IMMIGRATION OFFICER THAT HE OR SHE IS NOT ILLEGAL FOREIGNER**

(DHA-1746) **Form 6**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**INTERVIEW BY IMMIGRATION OFFICER OF PERSON NOT HAVING SATISFIED**  
**IMMIGRATION OFFICER THAT HE OR SHE IS NOT ILLEGAL FOREIGNER**  
**[Section 7(1)(g) read with section 9(3)(d); Regulation 6(6)]**

.....(first name(s) and surname of passenger) presented  
 \*himself/herself to me in terms of section 9(3)(d), read with section 34(8) of the Act and could not satisfy me  
 that \*he/she is not an illegal foreigner. Hereunder is a written account of the interview I conducted in terms of  
 regulation 6(6).

**\*Delete whichever is not applicable**

**PRIOR TO THE INTERVIEW**

Do you understand English?

Yes ☐

No ☐

Are you fit, well and willing to be interviewed?

Yes ☐

No ☐

Do you require an interpreter?

Yes ☐

No ☐

Is there anything important that you wish to raise before the interview starts?

Yes ☐ No ☐

**CONTENT OF THE INTERVIEW** (use additional pages if space is insufficient)

.....  
 .....  
 .....

**STATEMENT OF PERSON INTERVIEWED**

I ..... (name(s) and surname) hereby acknowledge  
 that the above is a true account of the interview that took place.

.....  
**Signature of foreigner**  
**(interviewed person)**

.....  
**Date**

Left thumbprint

**DECISION OF IMMIGRATION OFFICER**

.....  
 .....

**REASON(S) FOR DECISION** (use additional pages if space is insufficient)

.....  
 .....  
 .....

.....  
**Signature of immigration officer**

.....  
**Place**

.....  
**Date**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....Rank:.....

Port of entry:.....

**CERTIFICATE BY INTERPRETER**

I,.....(*name(s) and surname*)  
 of.....(*\*business/residential address*) with telephone  
 number..... and cell number .....hereby confirm that I have  
 mastered .....(*state language*) and that I have explained to  
 .....(*name(s) and surname of foreigner*) the contents of this notice in the said  
 language and that I am satisfied that the said foreigner fully understands it.

.....  
**Signature of interpreter**

.....  
**Place**

.....  
**Date**



# **FORM 7A** **RETURN OF ILLEGAL FOREIGNER**

(DHA-) Form 7A



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**RETURN OF ILLEGAL FOREIGNER**

[Section 7(1)(g) read with section 9(3)(d); Regulation 6(13)]  
**(ATTESTATION RELATING TO LOST OR DESTROYED TRAVEL DOCUMENTS)**

From: **Immigration Services**

Port of entry:.....(Name)

Telephone:.....

Facsimile: .....

To: Immigration or other appropriate authority:

.....(Name)

Port of entry:.....

Country:.....

The person for whom this document is issued arrived on...../...../.....

(date) at.....(name of) Airport on flight number

.....from.....(City and Country).

This person, who was found to be inadmissible, has lost or destroyed his/her travel documents and claims to be/is understood to be *(strike out whichever is not applicable and add any appropriate supporting information)*.

Names and surname:.....

Date of birth:.....Place of Birth:.....

Nationality:.....

Place of residence:.....

*Photograph*

The conveyor (where applicable) was instructed to remove the passenger from the territory of this State on flight.....(flight number) departing on ...../...../..... (date) at.....(time) from.....(name of) airport.

Pursuant to Annex 9 to the Convention on International Civil Aviation, the last State in which a passenger previously stayed and most recently travelled from is invited to accept him or her for re-examination when he or she has been refused admission to another State.

.....  
**Signature of immigration officer**.....  
**Date****IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position .....

Port of entry:.....

**FORM 7B**  
**(LETTER RELATING TO FRAUDULENT, FALSIFIED OR COUNTERFEIT TRAVEL**  
**DOCUMENTS OR GENUINE DOCUMENTS PRESENTED BY IMPOSTERS)**

(DHA-) Form 7B



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**

[Section 7(1)(g) read with section 9(3)(d); Regulation 6(14)]

**(LETTER RELATING TO FRAUDULENT, FALSIFIED OR COUNTERFEIT TRAVEL DOCUMENTS OR**  
**GENUINE DOCUMENTS PRESENTED BY IMPOSTERS)**

From: **Immigration Services**

Port of entry:.....(Name)

Telephone:..... Facsimile: .....

To: Immigration or appropriate authority: (Name)

Port of entry:.....(Name)

Country:.....(Name)

Enclosed herewith is a photocopy of a fraudulent/falsified/counterfeit passport/identity document/genuine document presented by an imposter, with number:.....

Country in whose name this document was issued:.....

The above-mentioned document was used by a person claiming to be:

Names and surname:.....

Date of birth:.....Place of birth:.....

Nationality:.....

Place of residence:.....

*Photograph*

This person arrived on..... (date) at..... (name of Port of entry) on  
 .....(Conveyance) from (City and Country).

The holder was refused entry into the Republic and the conveyor (where applicable) has been instructed to remove the passenger from the territory of the Republic on..... (conveyance) departing  
 at..... (time) and .....(date) from..... (name of port of entry).

The above-mentioned document will be required as evidence in the holder's prosecution and has been impounded. As this document is the property of the State in whose name it was issued, it will be returned, following prosecution, to the appropriate authorities.

According to Annex 9 to the Convention on International Civil Aviation, the last State in which a passenger previously stayed and most recently travelled from is invited to accept him or her for re-examination when he or she has been refused admission to another State.

.....  
**Signature of immigration officer**

.....  
**Place**

.....  
**Date**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position:.....

Office:..... Province: .....

**FORM 7C**  
**(REFERRAL LETTER FOR DETENTION OR PROSECUTION RELATING TO**  
**FRAUDULENT, FALSIFIED OR COUNTERFEIT TRAVEL DOCUMENTS OR GENUINE**  
**DOCUMENTS PRESENTED BY IMPOSTERS OR SUSPECTED ILLEGAL FOREIGNERS)**

(DHA-) Form 7C



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**

[Section 7(1)(g) read with section 9(3)(d); Regulation 6(14)]

**(REFERRAL LETTER FOR DETENTION OR PROSECUTION RELATING TO FRAUDULENT, FALSIFIED**  
**OR COUNTERFEIT TRAVEL DOCUMENTS OR GENUINE DOCUMENTS PRESENTED BY IMPOSTERS**  
**OR SUSPECTED ILLEGAL FOREIGNERS)**

From: **Station Commissioner/Head of Place of detention**

.....  
 .....  
 .....

Case No. ....

Enclosed herewith is a photocopy of a fraudulent/falsified/counterfeit passport/identity document/genuine document presented by an imposter, or suspected illegal foreigner with number.....

Country in whose name this document was issued:.....

The above-mentioned document was used by a person claiming to be:

Name and surname:.....

Date of birth:.....Place of birth:.....

Nationality:.....

Place of residence:.....

*Photograph*

The holder produced the above-mentioned document upon request for his/her identification or was found in possession of the above-mentioned document during an investigation.

The above-mentioned document will be required as evidence in the holder's prosecution and has been impounded. As this document is the property of the State in whose name it was issued, it will be returned, following prosecution, to the appropriate authorities.

Reason why prosecution is not proceeding:.....

.....  
 .....

.....  
**Signature of immigration officer**

.....  
**Place**

.....  
**Date**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position:.....

Office ..... Province .....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....

Rank/position:.....

Contact No.: Tel:.....

**FORM 8**  
**APPLICATION FOR VISA TO TEMPORARILY SOJOURN IN THE REPUBLIC**

[Form 8 substituted by GN R1328 of 29 November 2018 (wef 1 December 2018). \*]

(DHA-1738) **Form 8**



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**APPLICATION FOR VISA TO TEMPORARILY SOJOURN IN THE REPUBLIC**  
**[Section 10(2)(b) to (k); Regulation 9(1) and 20(9)]**

**CATEGORY OF PERMIT BEING APPLIED FOR**

Visitor's visa		Exchange Visa	
Study Visa (> 3 months)		Business Visa	
Treaty Visa		Work Visa: Critical Skills	
Relative's Visa		Work Visa: General	
Medical Treatment Visa (> 3 months)		Work Visa: Intra-company transfer	
		Intra-company transfer	
Retired Person's Visa		Corporate Worker Certificate	

**Biometric**  
**(Attach Fingerprint Form,**  
**with Photograph)**

**FOR OFFICIAL USE ONLY**

Office of application:	BLOK:	Track & Trace Ref No
Date received:	Date forwarded to Head Office:	
Application quality checked by/on:	Date received at Head Office	Remarks:
Passport seen/returned by/on:	Decision and date:	
Fee: Currency and amount		
Fee received by/on:		
Receipt no:		

Conditions of permit/Reason for refusal

**1 PERSONAL DETAILS**

Title:	Mr	Ms	Other (specify)	
Surname/Family name:			Given names:	
Maiden name:			Stage name:	
Previous/alternative name(s)/aliases, including details:				

\* *Editorial note:* GN R1328 in GG 42071 of 29 November 2018 contained an instruction to substitute Form 8, but Form 8 was not included in the *Government Gazette*. It was subsequently supplied by the Department.

Date of birth: Year..... Month..... Day.....					
Place of birth:	Town/City		Country		
Marital status:	Never married		Separated		Legally recognised spousal relationship
	Married		Widow/Widower		
	Divorced				

If separated, state:

Whether divorce proceedings have been instituted and when final decree is expected

.....

If divorced, provide:

Date of divorce .....

Divorce order must be attached.

If married to or in a permanent homosexual or heterosexual relationship with a citizen or permanent resident, a certified copy of the marriage or civil union certificate or a notarial agreement, as well as the requisite affidavits, must be attached.

## 2 CITIZENSHIP DETAILS

Present country of citizenship:

If acquired other than by birth, date and conditions under which acquired:

.....

Do you hold any other citizenship?

Yes

No

If so, of which country? (provide details .....

.....)

## 3 PASSPORT DETAILS

Passport number:

Country of issue:

Date of issue...../...../.....

Expiry date: ...../...../.....

If you have any other travel document required by your government, provide details:

Type of document: ..... Number: ..... Expiry date:...../...../.....

## 4 ADDRESSES

Residential address:

.....  
.....  
.....

Postal address:

.....  
.....  
.....

Postal code .....

Postal code .....

Country of residence if other than country of origin or above address:

Telephone No.: Work: (incl. area code)

Home: (incl. area code)

.....  
Cellphone number: (if available)

.....

.....  
Email address: (if available)

.....

Other addresses where you have lived during the last ten years other than your current address:

Address:

Period:

Country:

Do you hold the right of re-entry into your country of origin or country of residence if this differs?

Yes ☐ No ☐

If no, specify period and present status .....

Have you ever applied for asylum or refugee status in SA or any other country?

Yes ☐ No ☐ If yes, specify the country.....

Contact person:

Relationship:

Friend

Business

Associate

Relative

Other

Name:.....

Address:.....

Telephone No.: Work: (incl. area code) Home: (incl. area code)

Cellphone: (if available)

Email address: (if available)

Details regarding relatives and/or friends in the Republic, if any:

Name	Address	Relationship	Identity No

## 5 INTENTIONS/PROPOSED DURATION OF STAY IN THE REPUBLIC

Proposed date and place of departure for the Republic:	/	/	
Anticipated date and place of arrival in the Republic:	/	/	
Travelling by:		Road	
Air		Rail	
		Sea	
		Carrier	
What is your intended duration of stay in the Republic:			
Days/weeks/ months/or		Years	
Intended date of departure		/	/

Outline your proposed activities whilst in the Republic:

Provide the details of your intended stay in the Republic:

Name of place:	
Address:	
Period of stay:	
Date of departure:	

## 6 MAINTENANCE/DEPORTATION

State what funds you have available for maintain yourself during your stay in the Republic and whether you have a return ticket or other arrangements made for maintenance and return passage:

Available funds (foreign currency): Type:.....	Amount:.....
South African Rand equivalent: .....	(attach bank statement as proof of funds held):
Valid return or onward ticket no:	Expiry date: / /
Other:	

**7 PARTICULARS OF ANY FAMILY/DEPENDANTS ACCOMPANYING YOU** (attach page if space is not enough):

Full names	Date of birth	Relationship	Passport No.	Expiry date	Nationality	Occupation

If your spouse and/or other dependants are not accompanying you, do they intend to enter the country at a later stage?

Yes ☐ On (date)  /  /

No ☐ Details/reason(s):

.....

.....

Have you ever been refused entry into or deported from the Republic: If so, please provide details:

.....

.....

**8 SECURITY/HEALTH QUESTIONNAIRE**

Have you or any of your dependants accompanying (as listed in Part 7 above) you ever been convicted of any crime in any country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is a criminal/civil case pending against you or any of your dependants accompanying (as listed in Part 7 above) you in any country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you or any of your dependants (as listed in Part 7 above) suffering from tuberculosis, any other infectious or contagious disease or any mental or physical deficiency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you an unrehabilitated insolvent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been judicially declared incompetent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a member of or adherent to an association or organisation advocating the practice of social violence, or racial hatred?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been declared undesirable by the Director-General of the Department in South Africa?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Furnish full particulars if the reply to any of these questions is in the affirmative:		
.....		
.....		
.....		

**9 ANY ADDITIONAL INFORMATION YOU WISH TO BRING TO THE DEPARTMENT'S ATTENTION:**

.....
.....
.....

**10 DECLARATION BY APPLICANT**

I acknowledge that I understand the contents and implications of this application and solemnly declare that the above particulars given by me as well as all particulars in the attached supporting documentation are true and correct.	
.....	.....
Signature of applicant	Date

**THE FOLLOWING ORIGINAL SUPPORTING DOCUMENTS MUST ACCOMPANY THE APPLICATION**

In respect of all temporary residence visa applications, except medical treatment permits:

	Attached	
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic.		
A yellow fever vaccination certificate, where applicable.		
A medical report.		
A radiological report.		

Marriage certificate, civil union certificate or in the case of a foreign spousal relationship, proof of official recognition thereof issued by the authorities of the foreign country of the applicant (where applicable).		
The affidavit where a spousal relationship to a South African citizen or resident is applicable, as well as documentation proving cohabitation and the extent to which the related financial responsibilities are shared by the parties and setting out the particulars of children in the spousal relationship.		
Divorce decree, where applicable.		
Court order granting full or specific parental responsibilities and rights, where applicable.		
Death certificate, where applicable.		
Written consent from both parents and full parental responsibilities and rights parent, where applicable.		
Adoption order or certificate, where applicable		
Legal separation order, where applicable.		
Police clearance certificates in respect of applicants 18 years and older, in respect of all countries where person resided one year or longer since having attained the age of 18.		
Notarial Agreement		

**Additional supporting documents in respect of a study visa:**

	Attached	
	Yes	No
An official letter confirming provisional acceptance or acceptance at that learning institution and the duration of the course.		
An undertaking by the Registrar or Principal of the learning institution to-		
(i) provide proof of registration as contemplated in the relevant legislation within 60 days of registration; or		
(ii) in the event of failure to register by the closing date, provide the Director-General with a notification of failure to register within 7 days of the closing date of registration;		
(iii) within 30 days, notify the Director-General that the applicant is no longer registered with such institution; and		
(iv) within 30 days, notify the Director-General when the applicant has completed his or her studies or requires to extend such period of study.		
<b>In the case of a learner under the age of 18 years-</b>		
(i) an unabridged birth certificate;		
(ii) a valid passport;		
(iii) proof of physical address and contact number of the adult person residing in the Republic, who is acting or has accepted to act as such learner's guardian, including a confirmatory letter from that guardian; and		
(iv) proof of consent for the intended stay from both parents, or where applicable, from the parent or legal guardian who has been issued with a court order granting full or specific parental responsibilities and rights or legal guardianship of the learner.		
In the case of a foreign state accepting responsibility for the applicant in terms of a bilateral agreement, a written undertaking from such foreign state to pay for the departure of the applicant.		
Proof of medical cover renewed annually for the period of study with a medical scheme registered in terms of the Medical Schemes Act		
An undertaking by the parents or legal guardian that the learner will have medical cover for the full duration of the period of study		
Proof of sufficient financial means available to the learner whilst resident in the Republic		



**Additional supporting documents in respect of a treaty visa:**

	Attached	
	Yes	No
A letter from the relevant organ of state which is party to the treaty attesting to-		
(a) the nature of the programme;		
(b) participation of the foreigner in the specified programme;		
(c) the type of activities the foreigner is expected to perform and the duration thereof;		
(d) accommodation of the foreigner;		
(e) any other relevant details pertaining to the foreigner's stay in the Republic.		
A written undertaking by the sending or receiving organ of state accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		

**Additional supporting documents in support of a business visa****In respect of a business visa by a foreigner who intends to establish a business or invest in a business that is not yet established in the Republic**

	Attached	
	Yes	No
A certificate or factual finding report issued by a chartered accountant registered with the South African Institute of Chartered Accountants or a professional accountant registered with the South African Institute of Professional Accountants to the effect that-		
(a) at least an amount in cash to be invested in the Republic as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> , is available; or		
(b) at least an amount in cash and a capital contribution as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> is available;		
(c) undertaking by the applicant that at least 60% of the total staff complement to be employed in the operations of the business shall be South African citizens or permanent residents employed permanently in various positions: Provided that proof of compliance with this undertaking shall be submitted within 12 months of issuance of the visa.		
An undertaking to register with the-		
(a) South African Revenue Service;		
(b) Unemployment Insurance Fund;		
(c) Compensation Fund for Occupational Injuries and Diseases;		
(d) Companies and Intellectual Properties Commission (CIPC); where legally required; and		
(e) Relevant professional body, board or council recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act where applicable: Provided that upon registration, all certificates shall be submitted to the Director-General.		

	Attached	
	Yes	No
A letter of recommendation from the Department of Trade and Industry regarding-		
(a) The feasibility of the business; and		
(b) The contribution to the national interest of the Republic		

**Additional supporting documents in respect of a business visa****In respect of a business visa by a foreigner who has established a business or invested in an existing business in the Republic**

	Attached	
	Yes	No
A certificate or factual finding report issued by a chartered accountant registered with the South African Institute of Chartered Accountants or a professional accountant registered with the South African Institute of Professional Accountants to the effect that-		
(a) at least an amount in cash to be invested in the Republic as		

	determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> , is available or already invested; or		
(b)	at least an amount in cash and a capital contribution as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> , is available or already invested;		
(c)	proof that at least 60% of the total staff complement employed in the operations of the business are South African citizens or permanent residents employed permanently in various positions.		

	Attached	
	Yes	No
Proof of registration with the- (a) South African Revenue Service; (b) Unemployment Insurance Fund; (c) Compensation Fund for Occupational Injuries and Diseases; (d) Companies and Intellectual Properties Commission (CIPC), where legally required; and (e) relevant professional body, board or council recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act, where applicable.		
A letter of recommendation from the Department of Trade and Industry regarding- (a) The feasibility of the business; and (b) The contribution to the national interest of the Republic.		
A foreigner who invests or has invested in an existing business shall, in addition, submit- (a) Financial statement in respect of the preceding financial year; and (b) Proof of investment.		
The applicant must, within 12 months of the visa being issued, submit to the Director-General a letter of confirmation from the Department of Labour, that 60% of the staff complement employed in the operations of the business are South African citizens or permanent residents who are employed permanently in various positions.		

**Additional supporting documents in respect of a medical treatment visa:**

	Attached	
	Yes	No
A letter from the applicant's registered medical practitioner or medical institution within the Republic, confirming- (a) That space is available at the medical institution; (b) The estimated costs of the treatment; (c) Whether or not the disease or ailment is treatable or curable; (d) The treatment schedule; and (e) The period of intended treatment in the Republic.		
The details of, and confirmation by, the person or institution responsible for the medical expenses and hospital fees: Provided that in a case where the applicant's medical scheme or employer is not liable for expenses incurred, proof of financial means to cover medical costs.		
The particulars of the persons accompanying the applicant.		
A valid return air flight ticket, where applicable.		
Proof of sufficient financial means or provision for the costs indirectly related to the treatment.		

**Additional supporting documents in respect of a relative's visa:**

	Attached	
	Yes	No
Proof of kinship, within the second step, between the applicant and the citizen or permanent resident in the form of- (a) an unabridged birth certificate; and (b) where necessary, paternity test results.		
The financial assurance contemplated in section 18(1) of the Act shall be an amount, per person per month, as determined from time to time by the Minister		

by notice in the <i>Gazette</i> , to be proven by means of a current salary advice or a certified bank statement not older than three months at the time of application: Provided that the financial assurance shall not be required where the South African citizen or permanent resident is a dependant child.		
Police clearance.		

**Additional supporting documents in respect of a general work visa:**

	Attached	
	Yes	No
A written undertaking by the employer accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		
A written undertaking by the employer to ensure that the passport of his or her employee is valid at all times for the duration of his or her employment.		
A certificate by the Department of Labour confirming that- <ul style="list-style-type: none"> <li>(a) despite diligent search, the prospective employer has been unable to find a suitable citizen or permanent resident with qualifications or skills and experience equivalent to those of the applicant;</li> <li>(b) the applicant has qualifications or proven skills and experience in line with the job offer;</li> <li>(c) the salary and benefits of the applicant are not inferior to the average salary and benefits of citizens or employees occupying similar positions in the Republic;</li> <li>(d) contract of employment stipulating the conditions of employment and signed by both the employer and the applicant in line with the labour standards in the Republic and is made conditional upon the general work visa being approved;</li> <li>(e) proof of qualifications evaluated by SAQA and translated by a sworn translator into one of the official languages of the Republic; and</li> <li>(f) full particulars of the employer, including, where applicable, proof of registration of the business with the Commission on Intellectual Property and Companies (CIPC).</li> </ul>		
An undertaking by the employer to inform the Director-General should the applicant not comply with the provisions of the Act, or conditions of the visa.		
An undertaking by the employer to inform the Director-General upon the employee no longer being in the employ of such employer or when he or she is employed in a different capacity or role.		

**Additional supporting documents in respect of a critical skills work visa:**

	Attached	
	Yes	No
A written undertaking by the employer accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		
A written undertaking by the employer to ensure that the passport of his or her employee is valid at all times for the duration of his or her employment.		
A confirmation, in writing, from the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act, or any relevant government Department confirming the skills or qualifications of the applicant and appropriate post qualification experience.		
If required by law, proof of application for a certificate of registration with the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act.		
Proof of evaluation of the foreign qualification by SAQA and translated by a sworn translator into one of the official languages of the Republic.		

**Additional supporting documents in respect of an intra-company transfer work visa:**

	Attached	
	Yes	No
A written undertaking by the employer accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		
A written undertaking by the employer to ensure that the passport of his or her employee is valid at all times for the duration of his or her employment.		
The foreigner's contract of employment with the company abroad entered into for		

a period of not less than six months prior to the date of application.		
Letter from the company abroad confirming that the applicant shall be transferred to a branch, subsidiary or an affiliate of that company in the Republic.		

A letter from the branch, subsidiary or an affiliate in the Republic confirming the transfer of the foreigner and specifying the occupation and capacity in which the foreigner shall be employed.		
An undertaking from the employer that- (a) the foreigner shall only be employed in the specific position for which the visa has been issued; (b) the foreigner will, at all times, comply with the provisions of the Act and conditions of his or her visa and undertakes to immediately notify the Director-General if the employee refuses to comply with the provisions of the Act or conditions of the visa; and (c) A plan is developed for the transfer of skills to a South African citizen or permanent resident.		
An undertaking from the branch, subsidiary or an affiliate in the Republic to reimburse the Department any costs incurred in relation to the deportation of the holder of an intra-company transfer work visa and any of his or her family members.		

**Additional supporting documents in respect of a corporate worker certificate:**

	Attached	
	Yes	No
An application for a corporate worker certificate shall be accompanied by-		
(a) a valid passport of the applicant;		
(b) biometrics of the applicant;		
(c) the certificate contemplated in subregulation (8)(b);		
(d) a valid employment contract;		
(e) a written undertaking by the corporate applicant to ensure that the foreigner departs from the Republic upon termination of his or her contract of employment or accepting responsibility for the return or costs related to the deportation of the foreigner should it become necessary;		
(f) documentation contemplated in regulation 9(1)(b), (c) and (f);		
(g) proof of qualifications evaluated by SAQA, and translated by a sworn translator into one of the official languages of the Republic, or skills and experience in line with the job offer; and		
(h) a certificate of registration with the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act.		

**Additional supporting documents in respect of a retired person visa:**

	Attached	
	Yes	No
The minimum monthly payment to a foreigner from a pension fund or an irrevocable retirement annuity or a net worth or a combination of assets realising the amount determined from time to time by the Minister by notice in the <i>Gazette</i> .		

**Additional supporting documents in respect of an exchange visa:**

**In the case of a learning institution in the Republic in conjunction with a foreign learning institution or an organ of a foreign state organising or administering the exchange programme:**

	Attached	
	Yes	No
Proof of a valid return air ticket or written undertaking by the organ of state, learning institution or employer accepting responsibility for the return or deportation costs of the applicant, as the case may be.		
Proof of medical cover for the duration of the exchange period with a medical scheme registered in terms of the Medical Schemes Act, 1998 (Act 131 of 1998).		
A letter from the Department of Basic Education, or Higher Education and Training, or the learning institution in the Republic confirming that it is responsible for organising or administering the existence of the programme,		

outlining the activities, terms and conditions and duration thereof; and accepting full responsibility for the student whilst he or she is in the Republic.		
A letter from the foreign state institution or learning institution of the foreign state confirming the particulars of the applicant, the applicant's enrolment with a learning institution abroad, and the date on which the programme shall commence.		

**Additional supporting documents in respect of an exchange visa:**

**In the case of a programme of cultural, economic or social exchange, organised or administered by an organ of state or a learning institution, in conjunction with a learning institution or a foreign state institution:**

	Attached	
	Yes	No
Proof of a valid return air ticket or written undertaking by the organ of state, learning institution or employer accepting responsibility for the return or deportation costs of the applicant, as the case may be.		

**FORM 9**  
**APPLICATION FOR CHANGE OF CONDITIONS ON EXISTING VISA OR CHANGE OF STATUS**

(DHA-1740) **Form 9**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**APPLICATION FOR CHANGE OF CONDITIONS ON EXISTING VISA OR CHANGE OF STATUS**  
**[Section 10(6); Regulation 9(6)]**

**IMPORTANT**

I, \_\_\_\_\_ (*surname and name of applicant*), with passport number \_\_\_\_\_ declare that I understand that-

- 1 This application form and supporting documents must be submitted in person at a designated office of the Department;
- 2 Except in the case of medical treatment OR if the applicant is the spouse or dependant child of the holder of a business or work visa, the holder of a port of entry visa, visitor's visa and medical treatment visa may not apply for a change of conditions or status of an existing visa, unless he or she is in possession of a letter issued on behalf of the Minister of Home Affairs that good cause had been demonstrated for the submission of such an application;
- 3 An application for change of conditions or status of an existing visa will only be accepted if the application and relevant supporting documents are submitted at least 60 days before the expiry of the existing visa; and
- 4 An application for change of status does not grant me such status and does not entitle me to any benefits under the Immigration Act, including the right to sojourn in the Republic pending the decision in respect of the application.

\_\_\_\_\_  
 Signature of applicant

\_\_\_\_\_  
 Date

For official use only

BLOK:

Office of application:

Date received:

Track & Trace Ref No.:

Submission quality checked by:

Regional file no.:

.....

Persal number:.....

Date:.....

Passport checked/returned by:

Date received at Head Office:

.....

Persal number:.....

Date:.....

Fee received by:.....

Approved/rejected by:.....

Persal number:.....

Persal number:.....

Receipt number:.....

Rank:.....

Date:.....

Conditions of visa / Reason(s) for rejection:.....  
 .....  
 .....  
 .....

**PARTICULARS OF APPLICANT:**

Surname/Family name:	First name(s):	Date of birth:
Residential address in the Republic:		
Home Telephone No:		
Work Telephone No.		
Cellphone No.		
E-mail address:		

**PASSPORT DETAILS:**

Passport number:	Issuing country:
Date of issue:	Valid until:
If you have any other identity document issued by your government, provide details:	
Type of document:	Number:
Date of issue:	Expiry date:

**DETAILS OF ORIGINAL VISA ISSUED TO YOU PRIOR TO OR ON ARRIVAL IN THE REPUBLIC OF SOUTH AFRICA:**

Date of entry:	Permit No:
Place of entry:	Date of expiry:
Purpose of entry:	

**DETAILS OF ANY SUBSEQUENT VISA ISSUED TO YOU OR THE MOST RECENT RENEWAL THEREOF:**

Type of visa:	
Issued at:	Reference number:
Date of issue/renewal:	Date of expiry:

**I HEREBY APPLY TO:****\*Delete which is not applicable**

- Change the status of my existing visa. (Provide details of the type of visa you require and the reason(s)); or
- Change the conditions on my existing visa as follows. (Provide details)

Provide full details of your reason(s) for requesting the above-mentioned change of status or conditions (*attach page if space is not enough*):

.....  
 .....  
 .....  
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**SECURITY/HEALTH QUESTIONNAIRE**

Have you or any of your dependants accompanying you ever been convicted of any crime in any country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is a criminal/civil case pending against you or any of your dependants accompanying you in any country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you or any of your dependants suffering from tuberculosis, any other infectious or contagious disease or any mental or physical deficiency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you an unrehabilitated insolvent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Have you ever been judicially declared incompetent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a member of or adherent to an association or organisation advocating the practice of social violence, or racial hatred?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Furnish full particulars if the reply to any of the above questions is in the affirmative:

.....

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#### ADDITIONAL MATTERS YOU WISH TO BRING TO THE DEPARTMENT'S ATTENTION

.....

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.....

#### DECLARATION BY APPLICANT

1 I acknowledge that I understand the contents and implications of this application. I solemnly declare that the above particulars provided by me are true and correct.

2 All the documents in support of my application are attached.

Signed at.....on this.....day of.....20.....

.....  
Signature of applicant

#### THE FOLLOWING ORIGINAL SUPPORTING DOCUMENTS MUST ACCOMPANY THE APPLICATION In respect of all temporary residence visa applications, except medical treatment visas:

	Attached	
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic.		
A yellow fever vaccination certificate, where applicable.		
A medical report.		
A radiological report.		
Marriage certificate or in the case of a foreign spousal relationship, proof of official recognition thereof issued by the authorities of the foreign country of the applicant (where applicable).		
The affidavit where a spousal relationship to a South African citizen or resident is applicable, as well as documentation proving cohabitation and the extent to which the related financial responsibilities are shared by the parties and setting out the particulars of children in the spousal relationship.		
Divorce decree, where applicable.		
Court order granting full or specific parental responsibilities and rights, where applicable.		
Death certificate, in respect of late spouse, where applicable.		
Written consent from both parents and full parental responsibilities and rights parent[sic], where applicable.		
Proof of adoption where applicable.		
Legal separation order, where applicable.		
Police clearance certificates in respect of applicants 18 years and older, in respect of all countries where person resided one year or longer since having attained the age of 18.		

#### Additional supporting documents in respect of a study visa:

	Attached	
	Yes	No
An official letter confirming provisional acceptance or acceptance at that learning institution and the duration of the course.		
An undertaking by the Registrar or Principal of the learning institution to-		
(i) provide proof of registration as contemplated in the relevant		



<p>legislation within 60 days of registration; or</p> <p>(ii) in the event of failure to register by the closing date, provide the Director-General with a notification of failure to register within 7 days of the closing date of registration;</p> <p>(iii) within 30 days, notify the Director-General that the applicant is no longer registered with such institution; and</p> <p>(iv) within 30 days, notify the Director-General when the applicant has completed his or her studies or requires to extend such period of study.</p>		
<p><b>In the case of a learner under the age of 18 years-</b></p> <p>(i) an unabridged birth certificate;</p> <p>(ii) a valid passport;</p> <p>(iii) proof of physical address and contact number of the adult person residing in the Republic, who is acting or has accepted to act as such learner's guardian, including a confirmatory letter from that guardian; and</p> <p>(iv) proof of consent for the intended stay from both parents, or where applicable, from the parent or legal guardian who has been issued with a court order granting full or specific parental responsibilities and rights or legal guardianship of the learner.</p>		
<p><b>In the case of a foreign state accepting responsibility for the applicant in terms of a bilateral agreement, a written undertaking from such foreign state to pay for the departure of the applicant.</b></p>		

	Attached	
	Yes	No
An official letter confirming provisional acceptance or acceptance at that learning institution and the duration of the course.		
<p><b>An undertaking by the Registrar or Principal of the learning institution to-</b></p> <p>(i) provide proof of registration as contemplated in the relevant legislation within 60 days of registration; or</p> <p>(ii) in the event of failure to register by the closing date, provide the Director-General with a notification of failure to register within 7 days of the closing date of registration;</p> <p>(iii) within 30 days, notify the Director-General that the applicant is no longer registered with such institution; and</p> <p>(iv) within 30 days, notify the Director-General when the applicant has completed his or her studies or requires to extend such period of study.</p>		
<p><b>In the case of a learner under the age of 18 years-</b></p> <p>(i) an unabridged birth certificate;</p> <p>(ii) a valid passport;</p> <p>(iii) proof of physical address and contact number of the adult person residing in the Republic, who is acting or has accepted to act as such learner's guardian, including a confirmatory letter from that guardian; and</p> <p>(iv) proof of consent for the intended stay from both parents, or where applicable, from the parent or legal guardian who has been issued with a court order granting full or specific parental responsibilities and rights or legal guardianship of the learner.</p>		
Proof of medical cover renewed annually for the period of study with a medical scheme registered in terms of the Medical Schemes Act.		
An undertaking by the parents or legal guardian that the learner will have medical		

cover for the full duration of the period of study		
Proof of sufficient financial means available to the learner whilst resident in the Republic.		

**Additional supporting documents in respect of a treaty visa:**

	Attached	
	Yes	No
A letter from the relevant organ of state which is party to the treaty attesting to- (a) the nature of the programme; (b) participation of the foreigner in the specified programme; (c) the type of activities the foreigner is expected to perform and the duration thereof; (d) accommodation of the foreigner; (e) any other relevant details pertaining to the foreigner's stay in the Republic.		
A written undertaking by the sending or receiving organ of state accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		

**Additional supporting documents in support of a business visa****In respect of a business visa by a foreigner who intends to establish a business or invest in a business that is not yet established in the Republic**

	Attached	
	Yes	No
A certificate issued by a chartered accountant registered with the South African Institute of Chartered Accountants or a professional accountant registered with the South African Institute of Professional Accountants to the effect that- (a) at least an amount in cash to be invested in the Republic as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> , is available; or (b) at least an amount in cash and a capital contribution as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> is available; (c) undertaking by the applicant that at least 60% of the total staff complement to be employed in the operations of the business shall be South African citizens or permanent residents employed permanently in various positions: Provided that proof of compliance with this undertaking shall be submitted within 12 months of issuance of the visa.		
An undertaking to register with the- (a) South African Revenue Service; (b) Unemployment Insurance Fund; (c) Compensation Fund for Occupational Injuries and Diseases; (d) Companies and Intellectual Properties Commission (CIPC); where legally required; and (e) Relevant professional body, board or council recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act where applicable: Provided that upon registration, all certificates shall be submitted to the Director-General		

	Attached	
	Yes	No
A letter of recommendation from the Department of Trade and Industry regarding- (a) the feasibility of the business; and (b) the contribution to the national interest of the Republic.		

**Additional supporting documents in respect of a business visa****In respect of a business visa by a foreigner who has established a business or invested in an existing business in the Republic**

	Attached	
	Yes	No
A certificate issued by a chartered accountant registered with the South African Institute of Chartered Accountants or a professional accountant registered with		

the South African Institute of Professional Accountants to the effect that:		
(a) at least an amount in cash to be invested in the Republic as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> , is available or already invested; or		
(b) at least an amount in cash and a capital contribution as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> , is available or already invested;		
(c) proof that at least 60% of the total staff complement employed in the operations of the business are South African citizens or permanent residents employed permanently in various positions.		

	Attached	
	Yes	No
Proof of registration with the- (a) South African Revenue Service; (b) Unemployment Insurance Fund; (c) Compensation Fund for Occupational Injuries and Diseases; (d) Companies and Intellectual Properties Commission (CIPC), where legally required; and (e) relevant professional body, board or council recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act, where applicable.		
A letter of recommendation from the Department of Trade and Industry regarding- (a) the feasibility of the business; and (b) the contribution to the national interest of the Republic.		
A foreigner who invests or has invested in an existing business shall, in addition, submit- (a) financial statement in respect of the preceding financial year; and (b) proof of investment		
The applicant must, within 12 months of the visa being issued, submit to the Director-General a letter of confirmation from the Department of Labour, that 60% of the staff complement employed in the operations of the business are South African citizens or permanent residents who are employed permanently in various positions.		

**Additional supporting documents in respect of a medical treatment visa:**

	Attached	
	Yes	No
A letter from the applicant's registered medical practitioner or medical institution within the Republic, confirming- (a) that space is available at the medical institution; (b) the estimated costs of the treatment; (c) whether or not the disease or ailment is treatable or curable; (d) the treatment schedule; and (e) the period of intended treatment in the Republic.		
The details of, and confirmation by, the person or institution responsible for the medical expenses and hospital fees: Provided that in a case where the applicant's medical scheme or employer is not liable for expenses incurred, proof of financial means to cover medical costs.		
The particulars of the persons accompanying the applicant.		
A valid return air flight ticket, where applicable.		
Proof of sufficient financial means or provision for the costs indirectly related to the treatment.		

**Additional supporting documents in respect of a relative's visa:**

	Attached	
	Yes	No
Proof of kinship, within the second step, between the applicant and the citizen or permanent resident in the form of- (a) An unabridged birth certificate; and (b) Where necessary, paternity test results.		
The financial assurance contemplated in section 18(1) of the Act shall be an		

amount, per person per month, as determined from time to time by the Minister by notice in the <i>Gazette</i> , to be proven by means of a current salary advice or a certified bank statement not older than three months at the time of application: Provided that the financial assurance shall not be required where the South African citizen or permanent resident is a dependant child.		
Police clearance.		

**Additional supporting documents in respect of a general work visa:**

	Attached	
	Yes	No
A written undertaking by the employer accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		
A written undertaking by the employer to ensure that the passport of his or her employee is valid at all times for the duration of his or her employment.		
A certificate by the Department of Labour confirming that- <ul style="list-style-type: none"> <li>(a) despite diligent search, the prospective employer has been unable to find a suitable citizen or permanent resident with qualifications or skills and experience equivalent to those of the applicant;</li> <li>(b) the applicant has qualifications or proven skills and experience in line with the job offer;</li> <li>(c) the salary and benefits of the applicant are not inferior to the average salary and benefits of citizens or employees occupying similar positions in the Republic;</li> <li>(d) contract of employment stipulating the conditions of employment and signed by both the employer and the applicant in line with the labour standards in the Republic and is made conditional upon the general work visa being approved.</li> </ul>		
Proof of qualifications evaluated by SAQA and translated by a sworn translator into one of the official languages of the Republic; and [sic]		
Full particulars of the employer, including, where applicable, proof of registration of the business with the Commission on Intellectual Property and Companies (CIPC).		
An undertaking by the employer to inform the Director-General should the applicant not comply with the provisions of the Act, or conditions of the visa.		
An undertaking by the employer to inform the Director-General upon the employee no longer being in the employ of such employer or when he or she is employed in a different capacity or role.		

**Additional supporting documents in respect of a critical skills work visa:**

	Attached	
	Yes	No
A written undertaking by the employer accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		
A written undertaking by the employer to ensure that the passport of his or her employee is valid at all times for the duration of his or her employment.		
A confirmation, in writing, from the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act, or any relevant government Department confirming the skills or qualifications of the applicant and appropriate post qualification experience.		
If required by law, proof of application for a certificate of registration with the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act.		
Proof of evaluation of the foreign qualification by SAQA and translated by a sworn translator into one of the official languages of the Republic.		

**Additional supporting documents in respect of an intra-company transfer work visa:**

	Attached	
	Yes	No
A written undertaking by the employer accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		

A written undertaking by the employer to ensure that the passport of his or her employee is valid at all times for the duration of his or her employment.		
The foreigner's contract of employment with the company abroad valid for a period of not less than six months.		
Letter from the company abroad confirming that the applicant shall be transferred to a branch, subsidiary or an affiliate of that company in the Republic.		

	Attached	
	Yes	No
A letter from the branch, subsidiary or an affiliate in the Republic confirming the transfer of the foreigner and specifying the occupation and capacity in which the foreigner shall be employed.		
An undertaking from the employer that- (a) the foreigner shall only be employed in the specific position for which the visa has been issued; (b) the foreigner will, at all times, comply with the provisions of the Act and conditions of his or her visa and undertakes to immediately notify the Director-General if the employee refuses to comply with the provisions of the Act or conditions of the visa; and (c) a plan is developed for the transfer of skills to a South African citizen or permanent[sic]		
An undertaking from the branch, subsidiary or an affiliate in the Republic to reimburse the Department any costs incurred in relation to the deportation of the holder of an intra-company transfer work visa and any of his or her family members.		

**Additional supporting documents in respect of a retired person visa:**

	Attached	
	Yes	No
The minimum monthly payment to a foreigner from a pension fund or an irrevocable retirement annuity or a net worth or a combination of assets realising the amount determined from time to time by the Minister by notice in the <i>Gazette</i> .		

**Additional supporting documents in respect of an exchange visa:**

**In the case of a learning institution in the Republic in conjunction with a foreign learning institution or an organ of a foreign state organising or administering the exchange programme:**

	Attached	
	Yes	No
Proof of a valid return air ticket or written undertaking by the organ of state, learning institution or employer accepting responsibility for the return or deportation costs of the applicant, as the case may be.		
Proof of medical cover for the duration of the exchange period with a medical scheme registered in terms of the Medical Schemes Act.		
A letter from the Department of Basic Education, or Higher Education and Training, or the learning institution in the Republic confirming that it is responsible for organising or administering the existence of the programme, outlining the activities, terms and conditions and duration thereof and accepting full responsibility for the student whilst he or she is in the Republic.		
A letter from the foreign state institution or education and training institution confirming the particulars of the applicant, the applicant's enrolment with the foreign education and training institution abroad, and the date on which the programme shall commence.		

**Additional supporting documents in respect of an exchange visa:**

**In the case of a programme of cultural, economic or social exchange, organised or administered by an organ of state or a learning institution, in conjunction with a foreign education and training institution or a foreign state institution:**

	Attached	
	Yes	No
Proof of a valid return air ticket or written undertaking by the organ of state, learning institution or employer accepting responsibility for the return or deportation costs of the applicant, as the case may be.		
Proof of medical cover for the duration of the exchange period with a medical		

scheme registered in terms of the Medical Schemes Act.		
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	Attached	
	Yes	No
A letter from the organ of state or learning institution confirming the existence of the exchange programme; or A letter from the foreign learning institution confirming the enrolment of the applicant or the foreign state institution conducting the programme, as the case may be.		

**FORM 10**  
**APPLICATION FOR RENEWAL OF EXISTING VISA**

(DHA-1739) **Form 10**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**APPLICATION FOR RENEWAL OF EXISTING VISA**  
**[Section 10(7); Regulation 9(9)]**

For official use only	Track & Trace Ref No:	BLOK:
Office of application	File No:	
Date received:	Date forwarded to Head Office:	
Submission quality checked by:	Date received at Head Office:	Remarks:
Passport checked and returned by ..... Date: ..... Persal number:.....	Decision..... Date: ..... Persal number:.....	
Receipt no for fee paid		
Conditions of visa / reason(s) for refusal: ..... ..... ..... ..... .....		

**IMPORTANT:**

**An application for the renewal of a visa must be submitted in person at least 60 days prior to the expiry date of the existing visa.**

**PARTICULARS OF APPLICANT:**

Surname/Family name:	First name(s):	Date of birth:
Residential address in the Republic:	..... ..... .....	
Telephone No:		
Work Telephone No.		
Cellphone No.:		
E-mail address:		

**PASSPORT DETAILS:**

Passport number:	Issuing country:
Date of issue:	Valid until:
If you have any other identity document issued by your government, provide details:	
Type of document:	Number:
Date of issue:	Expiry date:

**DETAILS OF ORIGINAL VISA, AS ISSUED TO YOU PRIOR TO OR ON ARRIVAL IN SOUTH AFRICA:**

Date of entry:	Visa No:	Type of visa
Place of entry:	Date of expiry:	
Purpose of entry:		

**DETAILS OF ANY SUBSEQUENT VISA ISSUED TO YOU, OR THE MOST RECENT RENEWAL THEREOF:**

Type of visa:	Issued at:
Date of issue/renewal:	Date of expiry:

A visa is required until.....(date) for purposes of  
.....(state reason(s) for request).

The relevant documents in support of your application for the renewal of an existing visa must be attached.

**DECLARATION BY APPLICANT**

I acknowledge that I understand the content of this application and solemnly declare that the above particulars provided by me are true and correct.

.....

Signature of applicant

Signed at.....on this.....day of .....20.....

**THE FOLLOWING DOCUMENTS MUST ACCOMPANY AN APPLICATION FOR THE RENEWAL OF AN EXISTING VISA****In respect of the renewal of a port of entry visa**

	Attached	
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic.		
Proof of sufficient financial means.		
A valid return air flight ticket or proof of reservation thereof.		
Where the applicant is attending an activity or event, a letter from the organisation under whose control the activity or event is taking place.		

**In respect of the renewal of a visitor's visa for a period not exceeding three months**

	Attached	
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic.		
A statement or documentation detailing the purpose and duration of the visit.		
A valid return air flight ticket or proof of reservation thereof.		
Proof of sufficient financial means.		

**In respect of the renewal of a visitor's visa for a period exceeding three months**

	Attached	
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic.		
A medical report.		
A radiological report.		
Proof of a valid air flight ticket or proof of reservation thereof.		
Proof of sufficient financial means.		
A South African Police Clearance certificate where the applicant has been resident in the Republic for 12 months and longer.		

	Attached	
	Yes	No
In respect of an application by a person who is the spouse or dependant child of the holder of a visa issued in terms of section 11, 13, 14, 15, 17, 18, 19, 20 or 22 of the Act, a certified copy of such holder's visa and a written undertaking of financial responsibility for the applicant.		
In respect a teacher at an international school, a contract of employment signed by		



the employer and the applicant and a written undertaking of financial responsibility for the applicant.		
In respect of a person involved in the production of a film or advertisement in the Republic, documentation confirming such production and the duration thereof.		
In respect of a foreign journalist seconded to the Republic by a foreign news agency, documentation confirming such secondment and the duration thereof.		
In respect of a visiting professor or lecturer, an invitation from the host in the Republic.		
In respect of artists who wish to write, paint or sculpt, a portfolio of his or her previous work.		
In respect of a person involved in the entertainment industry who are travelling through the Republic to perform, confirmation thereof by the host in the Republic.		
In respect of a tour leader or host of a tour, a contract of employment signed by the employer and the applicant and a written undertaking of financial responsibility for the applicant.		
In respect of a foreigner who is required to stay in the Republic in order to testify as a state witness in a criminal court case, a written request signed by the Deputy Director of Public Prosecutions.		

**In respect of the renewal of a study visa:**

	Attached	
	Yes	No
An official letter from the Registrar or Principal of the learning institution confirming that the applicant is required to extend his or her period of study and the duration of such study.		
An undertaking by the Registrar or Principal of the learning institution to-		
(a) In the event of failure to register by the closing date, provide the Director-General with a notification of failure to register within 7 days of the closing date of registration; .		
(b) within 30 days, notify the Director-General that the applicant is no longer registered with such institution; and		
In the case of a foreign state accepting responsibility for the applicant in terms of a bilateral agreement, a written undertaking from such foreign state to pay for the departure of the applicant.		
Proof of medical cover with a medical scheme registered in terms of the Medical Schemes Act, 1998 (Act 131 of 1998).		
An undertaking by the parents or legal guardian that the learner will have medical cover for the full duration of the period of study		
Proof of sufficient financial means		

**In respect of the renewal of a treaty visa:**

	Attached	
	Yes	No
A letter from the organ of state which is party to the treaty attesting to-		
(a) the nature of the programme;		
(b) continued participation of the foreigner in the programme; and		
(c) the type of activities the foreigner is expected to continue to perform and the duration thereof.		
(d) accommodation of the foreigner; and		
(e) any other relevant details pertaining to the foreigner's stay in the Republic.		
A written undertaking by the sending or receiving organ of state accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		

**In respect of the renewal of a business visa**

	Attached	
	Yes	No
A certificate issued by a chartered accountant registered with the South African Institute of Chartered Accountants or a professional accountant registered with the South African Institute of Professional Accountants to the effect that-		
(a) the original cash investment into the book value of the business is still so invested;		
(b) a letter of confirmation from the Department of Labour that at least 60% of the total staff complement employed in the operations of the business		

are citizens or permanent residents employed permanently in various positions.		
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	Attached	
	Yes	No
<p>(a) Tax clearance certificate issued by the South African Revenue Service from the date on which the business became operational;</p> <p>(b) Proof of contributions made to the Unemployment Insurance Fund;</p> <p>(c) Proof of contributions made to the Compensation Fund for Occupational Injuries and Diseases;</p> <p>(d) Proof of registration with Companies and Intellectual Properties Commission (CIPC); and</p> <p>(e) Proof of registration with the professional body, board or council recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act.</p>		
<p>A letter of recommendation from the Department of Trade and Industry regarding-</p> <p>(a) the continued feasibility of the business; and</p> <p>(b) the contribution to the national interest of the Republic.</p>		
Financial statement in respect of the preceding financial year.		
A letter of confirmation from the Department of Labour that 60% of the staff complement employed in the operations of the business are still South African citizens or permanent residents who are employed permanently.		

**In respect of the renewal of a medical treatment visa:**

	Attached	
	Yes	No
<p>A letter from the applicant's registered medical practitioner or medical institution within the Republic, confirming-</p> <p>(a) That space is still available at the medical institution for the continued treatment of the applicant;</p> <p>(b) The estimated costs of the continued treatment; and</p> <p>(c) The treatment schedule and period and details of the continued treatment in the Republic.</p>		

	Attached	
	Yes	No
Details of, and confirmation by, the person or institution responsible for the medical expenses and hospital fees: Provided that in the case where a[n] applicant's medical scheme or employer is not liable for expenses incurred, proof of financial means to cover medical costs.		
The particulars of the persons accompanying the applicant.		
A valid return air flight ticket, where applicable.		
Proof of sufficient financial means or provision for the costs indirectly related to the treatment.		

**In respect of the renewal of a relative's visa:**

	Attached	
	Yes	No
Proof of kinship, within the second step, between the applicant and the citizen or permanent resident in the form of an unabridged birth certificate.		
The financial assurance per month, per person, as determined from time to time by the Minister by notice in the <i>Gazette</i> , to be proven by means of a current salary advice or a certified bank statement not older than three months at the time of application: Provided that the financial assurance shall not be required where the South African citizen or permanent resident is a dependant child.		
Police clearance.		

**In respect of the renewal of a general work visa:**

	Attached
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	Yes	No
A written undertaking by the employer accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		

	Attached	
	Yes	No
A written undertaking by the employer to ensure that the passport of his or her employee is valid at all times for the duration of his or her employment.		
A certificate by the Department of Labour confirming that- (a) The applicant continues to be employed in line with the labour standards; (b) contract of employment stipulating the conditions of employment and signed by both the employer and the applicant; and (c) Full particulars of the employer, including, where applicable, proof of registration of the business with the Commission on Intellectual Property and Companies (CIPC).		
An undertaking by the employer to inform the Director-General should the applicant not comply with the Act, or is no longer in the employ of such employer, or is employed in a different capacity or role.		
If required by law, proof of registration with the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act.		

**In respect of the renewal of a critical skills work visa:**

	Attached	
	Yes	No
A written undertaking by the employer accepting responsibility for the costs related to the deportation of the applicant and his or her dependant family members, should it become necessary.		
A written undertaking by the employer to ensure that the passport of his or her employee is valid at all times for the duration of his or her employment		
A copy of the existing critical skills visa as proof that the applicant still falls within the critical skills category.		
If required by law, proof of registration with the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act.		

**In respect of the renewal of a retired person visa:**

	Attached	
	Yes	No
Proof of payment to the applicant from a pension fund or an irrevocable retirement annuity or a net worth or a combination of assets realising the minimum amount per month as determined from time to time by the Minister by notice in the <i>Gazette</i> .		

**FORM 11**  
**APPLICATION FOR PORT OF ENTRY VISA OR TRANSIT VISA**

(DHA-84) Form 11



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**

**APPLICATION FOR PORT OF ENTRY VISA OR TRANSIT VISA**  
 [Section 7(1)(g) read with section 10A and 10B; Regulation 8(1)]

**NB: A SEPARATE APPLICATION FORM MUST BE COMPLETED IN RESPECT OF EACH ACCOMPANYING FAMILY MEMBER.**

**PERSONAL PARTICULARS**

Surname:									
First names ( <i>in full</i> ):									
Maiden name:									
Previous surname(s):									
	Y	Y	Y	Y	M	M	D	D	
Date of birth:									Country of birth:
Gender ( <i>write in full</i> ):									
Nationality:					If acquired by naturalisation, state original nationality:				
Where and when was present nationality obtained:									
Passport/Travel Document Number:					Issuing authority: _____				
Type of document: Diplomatic/Official/Ordinary Passport/Travel document/other ( <i>specify</i> )					Date of expiry: _____				
Permanent residential address in country of normal residence									
Period resident at this address: .....									
Country of permanent residence:					Telephone number: (.....).....				
.....					Home telephone No: .....				
.....					Cellphone No: .....				
.....					E-mail address: .....				
Period resident in that country:.....									
Occupation or profession:.....									
Name of Employer, University Organisation: .....									
Address:.....									
.....									
Telephone No:.....					Fax No:.....				
If self-employed, state name, address, telephone no. and nature of business:									
Name of business:.....									
Address:.....									
Telephone No:.....					Fax No:.....				

Marital status	Never married		Married		Widowed		Separated		Divorced	
First name(s) of spouse:										
Maiden name										

Date and place of marriage									
	Y	Y	Y	Y	M	M	D	D	
Date of birth of spouse:									Nationality .....

**VISIT TO SOUTH AFRICA**

Expected date of arrival in the Republic: YY.....MM.....DD.

Place of arrival:..... Purpose of visit:.....

Duration of stay (months, weeks or days).....

Number of entries required:

Single	
Two	
Multiple	

Proposed residential address (physical) in the Republic, including the full name(s) of your host or hotel:

Residential (physical) address in the Republic:.....

.....

Name of host or hotel:.....

Telephone of host or hotel:.....

Names of Organisations or persons you will be contacting during your stay in the Republic:

Name	Address	Relationship

Identity document number or permanent residence permit number of South African host, where applicable:.....

*Indicate by means of an X whichever is applicable*

Have you at any time applied for a permit to settle permanently in the Republic?	Yes		No	
Have you ever been restricted or refused entry into the Republic?	Yes		No	
Have you ever been deported from or ordered to leave the Republic?	Yes		No	
Have you ever been convicted of any crime in any country?	Yes		No	
Is a criminal action pending against you in any country?	Yes		No	
Are you an unrehabilitated insolvent?	Yes		No	
Are you suffering from tuberculosis or any other infectious or contagious disease or any mental or physical deficiency?	Yes		No	
Have you ever been judicially declared incompetent?	Yes		No	
Are you a member of, or adherent to an association or organisation advocating the practice of social violence or racial hatred or are you or have you been a member of an organisation or association utilising crime or terrorism to pursue its ends?	Yes		No	

Give particulars if reply to any of the questions above is in the affirmative:

.....

.....

.....

.....

.....

.....

**In the case of an official visit, submission of a *Note Verbale*.****In the case of a diplomat placed in the Republic, proof of placement.****To be completed only by passengers in transit to another country:**

Destination after leaving the Republic:.....

Mode of travel to destination:.....

Intended date and port of departure from the Republic to that destination:.....

Do you hold a visa or permit for temporary or permanent residence in the country of your destination? (Proof must be submitted).....

I \_\_\_\_\_  
 (surname and name of applicant) declare that

- the above details provided by me are true in substance and in fact and that I fully understand the meaning thereof;
- I understand that should my port of entry visa / transit visa / visitor's visa be approved, I would not be allowed to change my purpose of visit whilst in the Republic;
- I understand that if I need to extend my stay in the Republic for whatever reason, that such an application will only be accepted if it is submitted at least 30 days prior to the expiry date of my current visa; and
- I understand that if I depart from the Republic after the expiry date of my visa, that I would be declared an undesirable person and that I would not qualify for a visa or admission into the Republic for a period of at least \_\_\_\_\_.

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

FOR OFFICIAL USE		
Approved/not approved by ..... on.....	Type of visa: ..... .....	Reasons for decision: ..... .....

**DOCUMENTATION TO BE SUBMITTED IN SUPPORT OF A VISA NOT EXCEEDING A PERIOD OF THREE MONTHS**

	Attached	
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic.		
Proof of sufficient financial means.		
Proof of a valid return or onward ticket or purchase of ticket.		
Documentation outlining the purpose and duration of the visit, or a written invitation by the host(s) in the Republic, as the case may be.		
Where the applicant is attending an activity or event, a letter from the organisation under whose control the activity or event is taking place, confirming such attendance and whether or not the foreigner will be remunerated, and if remunerated, the amount of the remuneration.		
In respect of a dependant child accompanying the applicant to or joining the applicant in the Republic-		
(a) proof of consent from one or both parents or legal guardian, as the case may be, in the form of a letter or affidavit;		
(b) where applicable, a copy of a court order granting the applicant parental responsibilities and rights in respect of the child;		
(c) a letter from the person who is to receive the child in the Republic, containing his or her residential address in the Republic where the child will be residing;		
(d) a copy of the identity document or valid passport and visa or permanent residence permit of the person who is to receive the child in the Republic; and		
(e) the contact details of the parents or legal guardian.		

	Attached	
	Yes	No
In respect of medical treatment for a period not exceeding three months-		
(a) A letter from the applicant's registered medical practitioner or medical institution within the Republic, confirming-		
(i) that space is available at the medical institution;		
(ii) the estimated costs of the treatment;		
(iii) whether or not the disease or ailment is curable;		
(iv) treatment schedule; and		
(v) the period of intended treatment in the Republic.		
(b) Details of the person or institution responsible for the medical		

<p>expenses and hospital fees: Provided that in the case where the applicant's medical scheme or employer is not liable for expenses incurred, proof of financial means to cover the medical costs.</p> <p>(c) The particulars of the persons accompanying the applicant;</p> <p>(d) A valid return air flight ticket, where applicable;</p> <p>(e) Proof of sufficient financial means or provision for the costs indirectly related to the treatment.</p>		
<p>In respect of studies for a period not exceeding three months-</p> <p>(a) An undertaking by the Registrar or Principal of the learning institution to-</p> <p>(i) provide proof of registration of the learning institution as contemplated in the relevant legislation, within 60 days of registration;</p> <p>(ii) in the event of failure to register by the closing date, provide the Director-General with a notification of failure to register within 7 days of the closing days of registration;</p> <p>(iii) within 30 days, notify the Director-General that the applicant is no longer registered with such institution; and</p> <p>(iv) within 30 days, notify the Director-General when the applicant has completed his or her studies or requires to extend such period of study.</p>		

	Attached	
	Yes	No
<p>In respect of short-term work to be undertaken in the Republic, a letter from the employer stipulating-</p> <p>(a) the purpose or necessity of the work;</p> <p>(b) the nature of the work;</p> <p>(c) qualification and skills required for the work;</p> <p>(d) the duration of the work;</p> <p>(e) the place of work;</p> <p>(f) duration of the visit;</p> <p>(g) proof of remuneration or stipend that the foreigner will receive from the employer; and</p> <p>(h) identity and contact details of the prospective employer or relevant contact person from the host institution.</p>		

**DOCUMENTATION TO BE SUBMITTED IN SUPPORT OF A VISITOR'S VISA APPLICATION FOR A PERIOD EXCEEDING THREE MONTHS**

	Attached	
	Yes	No
Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic.		
A yellow fever vaccination certificate, where applicable.		
A medical report.		
A radiological report.		
Marriage certificate or in the case of a foreign spousal relationship, proof of official recognition thereof issued by the authorities of the country concerned, if available.		
The affidavit where a spousal relationship to a South African citizen or resident is applicable, as well as documentation proving cohabitation and the extent to which the related financial responsibilities are shared by the parties and setting out the particulars of children in the spousal relationship.		
Divorce decree, where applicable.		
Court order granting full or specific parental responsibilities and rights, where applicable.		
Death certificate, in respect of late spouse, where applicable.		
Written consent from both parents and court order granting full parental responsibilities and rights parent [sic], where applicable		

	Attached	
	Yes	No
Proof of legal adoption where applicable.		
Legal separation order, where applicable.		

Police clearance certificates in respect of applicants 18 years and older, in respect of all countries where person resided one year or longer since having attained the age of 18.		
A yellow fever vaccination certificate, where applicable.		
Proof of academic sabbatical, where applicable.		
Proof of voluntary or charitable activities to be undertaken, where applicable.		
Proof of research to be undertaken, where applicable.		
In respect of an application by a person who is the spouse or dependant child of the holder of a visa issued in terms of section 11, 13, 14, 15, 17, 18, 19, 20 or 22 of the Act, a certified copy of such holder's visa and a written undertaking of financial responsibility for the applicant.		
In respect a teacher at an international school, a contract of employment signed by the employer and the applicant and a written undertaking of financial responsibility for the applicant.		
In respect of a person involved in the production of a film or advertisement in the Republic, documentation confirming such production and the duration thereof.		
In respect of a foreign journalist seconded to the Republic by a foreign news agency, documentation confirming such secondment and the duration thereof.		
In respect of a visiting professor or lecturer, an invitation from the host in the Republic.		
In respect of artists who wish to write, paint or sculpt, documentation confirming the activity to be undertaken and the duration thereof.		
In respect of a person involved in the entertainment industry who would be travelling through the Republic to perform, confirmation thereof by the host in the Republic.		
In respect of a tour leader or host of a tour, a contract of employment signed by the employer and the applicant and a written undertaking of financial responsibility for the applicant.		



**FORM 12**  
**AFFIDAVIT IN RESPECT OF PARTIES TO PERMANENT HOMOSEXUAL OR**  
**HETEROSEXUAL RELATIONSHIP**

(DHA-1712A) Form 12



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**AFFIDAVIT IN RESPECT OF PARTIES TO PERMANENT HOMOSEXUAL OR HETEROSEXUAL**  
**RELATIONSHIP**  
**[Section 7(1)(g), read with sections 11(6) and 26(b); Regulations 3(2) and (4)]**

**PART A**  
**TO BE COMPLETED IN THE CASE OF INITIAL APPLICATION:**

Particulars of citizen / permanent resident / foreigner\*

Surname:..... Gender:.....

First name(s):.....

Residential address:.....

.....

.....

Identity No. ....

Or:

Passport No:..... Nationality:..... Date of birth:.....

Date of first entry into the Republic:..... Type of permit :.....

Date of expiry of permit:.....

Particulars of foreigner

Surname:..... Gender:.....

First name(s):.....

Residential address:.....

Passport No:..... Date of birth: ..... Place of birth:.....

Nationality:..... Date of first entry into the Republic:.....

Type of visa/permit held:..... Date of expiry:.....

I, ..... (first name(s) and surname) being an \*unmarried/divorced/widowed person and..... (first name(s) and surname) being an \*unmarried/divorced/widowed person do hereby \*make oath and say/hereby solemnly affirm that we are parties to a \*homosexual/heterosexual spousal relationship for the past..... years..... months which is intended to be permanent and to the exclusion of any other person from our relationship. Our relationship involves cohabitation and a reciprocal obligation to support one another emotionally and financially. Neither of us are party to a marriage or spousal relationship with any other person. To substantiate our relationship we attach documentation proving cohabitation and the extent to which the related financial responsibilities are shared by us.

We are the parents of the following children:

Name of child	Date of birth	Name of mother of child	Name of father of child

We agree to submit an affidavit confirming the existence of our relationship after two years from the date of issue of the visa or permit and undertake to inform the Director-General in writing as soon as our spousal relationship cease[s] to exist.

.....

**Signature of citizen/permanent resident or foreigner**

**Signature of foreign spouse**

Thus signed and \*sworn/solemnly affirmed before me on this.....day  
of.....20.....

**Commissioner of Oaths**

First name(s):.....

Surname:.....

Capacity:.....

Place:.....

**OFFICE STAMP**

**\*Delete which is not applicable**

(DHA-1712A) **Form 12**



**DEPARTMENT OF HOME AFFAIRS  
REPUBLIC OF SOUTH AFRICA**

**AFFIDAVIT IN RESPECT OF PARTIES TO PERMANENT HOMOSEXUAL OR HETEROSEXUAL  
RELATIONSHIP**

[Section 7(1)(g), read with sections 11(6) and 26(b); Regulations 3(2) and (4)]

**PART B**

**TO BE COMPLETED IN ORDER TO DEMONSTRATE THAT THE SPOUSAL RELATIONSHIP CONTINUES  
TO EXIST TWO YEARS AFTER THE ISSUANCE OF THE VISA OR PERMIT**

Particulars of \*citizen/permanent resident/foreigner on a temporary residence permit

Surname:.....	Gender:								
---------------	---------	--	--	--	--	--	--	--	--

First name(s):.....

Residential address:.....

Identity No													
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--

Or:

Passport No:.....Nationality:.....Date of birth:.....

Date of first entry into the Republic:.....Type of permit:.....

Date of expiry:.....

Particulars of foreigner

Surname:.....	Gender:								
---------------	---------	--	--	--	--	--	--	--	--

First name(s):.....

Residential address:.....

Passport No:.....Date of birth:.....Place of birth: .....

Nationality:.....Date of first entry into the Republic:.....

Type of permit held:.....Date of expiry:.....

I, ..... (name and surname) being an  
\*unmarried/divorced/widowed person and.....(name and surname)  
being an \*unmarried/divorced/widowed person do hereby \*make oath and say/hereby solemnly affirm that on  
..... (date) we deposed to an affidavit confirming that we are parties to a spousal  
relationship. We are not married and the spousal relationship mentioned in the preceding paragraph still  
subsists with all the characteristics mentioned in Part A of this Form.  
To substantiate our relationship we attach documentation proving cohabitation and the extent to which the  
related financial responsibilities are shared by us.

We are the parents of the following children:

Name of child	Date of birth	Name of mother of child	Name of father of child

.....

**Signature of spouse**

.....

**Signature of spouse**

Thus signed and \*sworn/solemnly affirmed before me on this.....day  
of.....20.....

.....

**Commissioner of Oaths**

First name(s):.....

Surname:.....

Capacity:.....

Place:.....

**\*Delete which is not applicable**

# **FORM 13** **APPLICATION FOR CORPORATE VISA**

(DHA-1743) **Form 13**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**APPLICATION FOR CORPORATE VISA**  
[Section 7(1)(g) read with section 21; Regulation 20(1)]

**For official use only**

Office:	BLOK:
Date received:	File No.:
Application received and checked for compliance on...../...../.....(date) by.....(initials and surname). Persal.....	
Application fee: R	Receipt no.
Application processed on...../...../.....(date) by.....(initials and surname). Persal No: ..... Appointment no: .....	
Recommendation:	
Decision:	
Reason(s) for decision:	
Number of corporate worker authorisation certificates authorised:	

**Note:** Form to be completed in full and fields marked (\*) are compulsory and should the information not be provided, the application will not be considered.

## BACKGROUND DETAILS OF CORPORATE APPLICANT TO EMPLOY FOREIGNERS

Name of Company:.....	
*Registration No: .....	*Tax reference number: .....
Contact person: Name and surname .....	
Identity No: ..... Capacity:.....	
Cell phone No: ..... Tel No: ..... Fax No: .....	
E-mail address:.....	
Residential address (not work address): .....	
Company's physical address: ..... ..... .....	Company's postal address: ..... ..... .....
If a subsidiary, name of principal company and its physical address:.....	
Nature of business conducted: .....	Total no. of workers employed currently: ..... Citizens (.....) and Foreigners (.....)
<b>THE ABOVE-MENTIONED COMPANY OR ORGANISATION HEREBY APPLIES FOR A CORPORATE VISA TO EMPLOY FOREIGNERS</b>	
Type of position:.....	No of workers required:.....
Type of position:.....	No of workers required:.....
Type of position:.....	No of workers required:.....

**REQUIREMENTS**

<p>(a) Proof of the need to employ the requested number of foreigners;</p> <p>(b) A certificate by the Department of Labour confirming-</p> <p>(i) that despite diligent search, the corporate applicant was unable to find suitable citizens or permanent residents to occupy the position available in the corporate entity;</p> <p>(ii) the job description and proposed remuneration in respect of each foreigner;</p> <p>(c) That the salary and benefits of any foreigner employed by the corporate applicant shall not be inferior to the salary and benefits of citizens or permanent residents occupying similar positions in the Republic;</p> <p>(d) A certificate by the Department of Trade and Industry;</p> <p>(e) Proof of registration with the-</p> <p>(i) South African Revenue Service;</p> <p>(ii) Unemployment Insurance Fund;</p> <p>(iii) Compensation Fund for Occupational Injuries and Diseases; and</p> <p>(iv) Companies and Intellectual Properties Commission (CIPC), where legally required.</p>	Yes	No	<p>Comments:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
An undertaking by the employer to inform the Director-General should any employee not comply with the provisions of the Act or visa conditions or is no longer in the employ of such employer or is employed in a different capacity or role.	Yes	No	<p>Comments:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
A written undertaking by the corporate applicant to pay the deportation costs of any foreign employee accepting responsibility for the return costs related to the deportation of the foreign employee, should it be necessary.	Yes	No	
Proof, by the corporate applicant, that at least 60% of the total staff complement that are employed in the operations of the business are citizens or permanent residents employed permanently in various positions.			
<i>Pro forma</i> type of employment contract ( <i>to be certified for adherence to basic conditions of employment</i> ).	Yes	No	

**UNDERTAKING BY CORPORATE APPLICANT**

I,.....(name(s) and surname)  
 with identity number....., in my capacity as.....  
 of the above-mentioned company, undertake to abide by the terms and conditions of the visa should it be issued to me and to comply with the provisions and objectives of the Act.

I solemnly declare that I am authorised to make this application and to accept the obligations it involves on behalf of the aforesaid company.

I declare that the information contained in this application is true and correct and undertake to-

(a) accept full responsibility for the foreigners to be employed;

(b) ensure that the passport of the foreigner is valid at all times;

(c) inform the Department if any such foreigner is no longer in compliance with the Act, no longer employed by the company or employed in a different capacity, prior to occupying such different

- (d) capacity;  
ensure that such foreigner departs from the Republic upon completion of his or her contract of employment.

I declare that none of the foreigners to be employed are not presently in the Republic and are not prohibited persons in terms of the Act.

I understand that the corporate visa issued to me may be terminated in case of breach of this undertaking and any other conditions not complied with.

.....  
**Signature**

Signed at.....on this.....day of.....20.....

## FORM 14 CORPORATE VISA

(DHA-1718) Form 14



### DEPARTMENT OF HOME AFFAIRS REPUBLIC OF SOUTH AFRICA CORPORATE VISA

**[Section 7(1)(g) read with section 21(1); Regulation 20(4)(a)]**

Departmental reference number:.....

Name of corporate visa holder:.....

Company's physical address:

.....  
.....  
.....  
.....  
.....

Contact person:

Initials and surname.....

Capacity:.....

Cell phone No.....

Tel No.:.....

Fax No.:.....

E-mail address:.....

In terms of section 21 of the Act, the above-named corporate visa holder is hereby authorised to issue a total of.....corporate worker authorisation certificates.

#### FOR OFFICIAL USE ONLY

Period of validity (in line with regulation 20(5)(a))

Authorisation certificate numbers

.....  
Signature of issuing officer

Appointment No.....

Date:.....

#### Employment requirements

Type of position		*Duration		Number of workers	
Type of position		*Duration		Number of workers	
Type of position		*Duration		Number of workers	
Type of position		*Duration		Number of workers	

The duration of employment commences on the date of the worker's first entry into the Republic and relates to the period this visa is in force. This visa cannot be used to employ subsequent workers after having employed the specified number. Furthermore, the period of validity of the worker authorisation certificates will be in line with the validity period of this visa.

\*In the case of seasonal workers, such workers may be employed from.....to.....(date).

\*In the case of workers employed in accordance with an agreement with a foreign state referred to in section 21(4)(b) of the Act, those workers must be citizens of the Republic of .....(country)

The above-mentioned worker(s) must be admitted at.....port of entry.

.....  
For Director-General

\*Delete which is not applicable

.....  
Date

Official stamp

# **FORM 15** **CORPORATE WORKER AUTHORISATION CERTIFICATE**

(DHA-1733) Form 15



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**CORPORATE WORKER AUTHORISATION CERTIFICATE**  
**[Section 7(1)(g); Regulation 20(4)(b)]**

**CERTIFICATE NO.:** .....

This authorisation entitles the following foreign national, hereinafter referred to as the **CORPORATE WORKER**, to approach the South African Mission/South African Department of Home Affairs with a contract of employment signed by both parties, to obtain a corporate worker certificate valid for ..... years (*period linked to validity of corporate visa*), from ..... to ..... as a corporate worker to be employed by ....., hereinafter referred to as the **CORPORATE EMPLOYER**.

**Details of corporate worker**

First Names:.....  
Surname:..... Date of birth:.....  
Gender:..... Passport No.:.....  
Nationality:..... Country of birth:.....  
Telephone No.:..... Cell phone No.:.....  
Current occupation:.....  
Occupation with Corporate Employer:.....

**Details of Corporate Employer**

Contact person:.....  
Telephone No.: ..... Cell phone:.....  
Position:.....  
Division:.....  
Signature:..... Date:.....

On receipt of a corporate worker certificate the **CORPORATE WORKER** shall return this authorisation certificate to the **CORPORATE EMPLOYER** for safekeeping with the **CORPORATE WORKER'S** employment records

The validity of this authorisation certificate is subject to the following conditions:

- (a) The corporate worker is authorised to work only for the corporate employer within the company mentioned in the corporate visa and not any other corporate employer, and the corporate worker is not authorised to engage in any other form of employment or self-employment;
- (b) the corporate employer and corporate worker undertake to ensure that the corporate worker is at all times in possession of a valid passport in accordance with regulation 2, which is not less than 30 days after the period of the intended stay;
- (c) the corporate employer undertakes to immediately notify the Department if the employer has reason to believe that the corporate worker is no longer in compliance with section 21(1)(a)(i) of the Act or when the corporate worker has left its employ;
- (d) the corporate employer ensures the departure of the corporate worker from the Republic on completion of his or her tour of duty;
- (e) the corporate authorisation certificate cannot be exchanged for or used to employ another corporate worker once it is issued to a specific individual; and
- (f) the corporate worker employed in terms of an inter-governmental agreement or for seasonal labour may not renew his or her corporate worker certificate or apply for a change of status in the Republic.

Official stamp



.....

**DIRECTOR-GENERAL**

**Notification to Department upon termination of employment contract**

To: Director-General

Department of Home Affairs

It is hereby confirmed that the **CORPORATE WORKER**, .....

.....(name and surname), with passport no.....

..... and authorisation certificate no. ....

\*(a)has departed from the Republic;

\*(b)has changed his or her status or is no longer in compliance with the Act because

.....

\*(c)is unfit for duty for the remainder of the period of the employment contract; or

\*(d)is deceased.

.....  
**Signature of Corporate Employer**

Surname:.....

Name(s): .....

Designation: .....

.....  
**Place**

.....  
**Date**

*Official stamp of Corporate Employer*

**FORM 16**  
**PROGRESS REPORT BY ORGAN OF STATE OR LEARNING INSTITUTION**  
**REGARDING EXCHANGE PROGRAMME**

(DHA-1758) **Form 16**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**PROGRESS REPORT BY ORGAN OF STATE OR LEARNING INSTITUTION REGARDING EXCHANGE**  
**PROGRAMME**

**[Section 7(1)(g) read with section 22(a); Regulation 21(3)]**

Name of Organ of State/Learning Institution:.....

Business address of Organ of State/Learning Institution:.....

Telephone no.:..... Fax no.:.....

Contact person:.....

Designation:.....

I hereby report that the exchange programme \*has been completed/is ongoing.

During the calendar year of ..... (year), .....

(number) foreigners participated in the programme in the Republic.

**Note:** Details regarding the name(s) and surname, date of birth and passport number of the foreigner, the type of programme attended by the foreigner and the country from which the foreigner lodged his or her application, should be provided on a separate page.

**Note:** Attach proof of medical cover in the Republic.

During the year the following foreign participants failed to complete the exchange programme:

Name	Date of birth	Passport No.
The reasons for the failure to complete the exchange programme are as follows ( <i>provide reason for each person</i> ):		
Surname and initials	Reason(s)	

.....  
**Signature of designated person**

.....  
**Date**

\_\_\_\_\_  
 (Rank/Designation)

# **FORM 17** **ASYLUM TRANSIT VISA**

(DHA-1732) **Form 17**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**ASYLUM TRANSIT VISA**

[Section 7(1)(g) read with section 23(1); Regulation 22]

**To be completed at a Port of entry or any other place designated by the Director-General by a person who declares his or her intention to apply for asylum in terms of the Refugees Act, 1998. To be completed in black ink with BLOCK LETTERS**

**PART A**  
**PERSONAL DETAILS OF APPLICANT**

Surname/Family name											
Name(s) in full											
Date of birth	C	C	Y	Y	M	M	D	D			
Passport No.										(Where applicable)	
Identity No.										(Where applicable)	
Sex (write in full)											
Country of birth											
Province											
Place of birth											
Current Nationality											
Previous nationality(ies) (Where applicable):											
Ethnic Group											
Language spoken											
Level of fluency in English											
Read (please tick the appropriate box)		Good			Fair			Poor			
Write (please tick the appropriate box)		Good			Fair			Poor			
Other languages (a)											
(b)											
Religion											
Marital status (please tick the appropriate box)		Single			Married			Divorced			
		Widow			Widower						
Type of marriage: (please tick the appropriate box)		Civil Union			Religious			Customary			
	Other (specify)										
Number of spouses											
Occupation/Profession											

Residential address during the last year											
Address in the RSA											
<b>Contact details of person in RSA</b>											
Surname/Family name											
Name(s) in full											
Contact number (personal, if any)											
Contact details of person in RSA											
Details of dependants (below 18 years of age accompanying applicant)											
<b>Dependant 1</b>											
Surname/Family name											
Name(s) in full											
Date of birth	C	C	Y	Y	M	M	D	D			
Passport No.									(Where applicable)		
Identity No.									(Where applicable)		
Sex (write in full)											
Country of birth											
Province											
Place of birth											
Current nationality											
<b>Dependant 2</b>											
Surname/Family name											
Name(s) in full											
Date of birth	C	C	Y	Y	M	M	D	D			
Passport No.									(Where applicable)		
Identity No.									(Where applicable)		
Sex (write in full)											
Country of birth											
Province											
Place of birth											
Current nationality											
<b>Dependant 3</b>											
Surname/Family name											
Name(s) in full											
Date of birth	C	C	Y	Y	M	M	D	D			
Passport No.									(Where applicable)		
Identity No.									(Where applicable)		
Sex (write in full)											
Country of birth											
Province											
Place of birth											
Current nationality											
<b>Dependant 4</b>											
Surname/Family name											
Name(s) in full											
Date of birth	C	C	Y	Y	M	M	D	D			
Passport No.									(Where applicable)		

Identity No.										(Where applicable)
Sex (write in full)										
Country of birth										
Province										
Place of birth										
Current Nationality										

**PART B**  
**DECLARATION BY APPLICANT**

I, the undersigned Surname/Family Name.....  
(first name (s)).....

Declare that-

- I am seeking asylum in the Republic; and
- I \*have/have not previously applied for asylum in the Republic.
- I understand that if I have made a false statement I shall be guilty of an offence and liable on conviction to a fine or imprisonment.
- I understand that I must report to a designated Refugee Reception Office within 5 working days to submit my application for asylum, that my visa to report to a Refugee Reception Office may not be renewed and that upon expiry thereof, I shall become an illegal foreigner.

.....  
**Signature of applicant**

.....  
**Date**

**Left thumbprint**

**Photograph**

Note: If the asylum seeker is accompanied by dependants, their names, surnames, gender and dates of birth must be indicated on this form as well as the left thumbprint and photograph of each person accompanying that asylum seeker.

.....  
**Signature of immigration officer**

Surname:.....  
First name(s):.....  
Rank/position:.....  
Date:.....  
Place:.....  
Appointment /Persal No.:.....

Official stamp

**\*Delete whichever is not applicable**

**FORM 18**  
**APPLICATION FOR PERMANENT RESIDENCE PERMIT**

(DHA-947) Form 18



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**APPLICATION FOR PERMANENT RESIDENCE PERMIT**  
**[Section 25(2); Regulation 23(1)]**

**IMPORTANT**

I, \_\_\_\_\_ (surname and name of main applicant),  
 \_\_\_\_\_ (passport number) declare that I understand that:

- 1 This application form and supporting documents must be submitted in person.
- 2 If my spouse and/or dependant children over the age of 16 years form part of the application, they will accompany me when submitting the application for the purpose of providing their biometrics.
- 3 An application for permanent residence status does not grant me such status. I and all my family members will continue to renew our temporary residence visas until the outcome of the permanent residence application has been received.
- 4 All the documents in support of my application must be originals or copies authenticated by the issuing authority in the country of origin.
- 5 I am obliged to inform the Department of any change of address, or change in information or circumstances that could influence the outcome of the application, whilst the application is being processed.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

REFERENCE NO.: .....

**LIST OF APPLICANTS**

Surname	First name(s)	Date of birth	Gender	Relationship	Applicable section of Act	Reference number

Application processed by.....(first name and surname of official)

**Decision**

Application \*approved/rejected.

If rejected, reason(s) for decision:

.....

.....

In the case of conditional approval, state conditions:

.....

.....

Signature:.....

Date:.....

Rank:..... Office:.....	Official stamp	
----------------------------	----------------	--

**Details of principal applicant:**

Title:..... Surname:.....

First name: .....

Maiden name: .....

Any other former surnames: .....

Date of birth: Year 

--	--	--	--

 Month 

--	--

 Day 

--	--

Country of birth: ..... Nationality of birth:.....

Present nationality: .....

Passport no.: ..... Expiry date: .....

Issuing authority of passport: .....

Marital status:

Never married	Married	Permanent spousal relationship	Divorced	Widowed	Legally separated
---------------	---------	--------------------------------	----------	---------	-------------------

Type of marriage or spousal relationship:

Civil marriage	Customary marriage	Religious marriage	Permanent heterosexual relationship	Permanent homosexual relationship
----------------	--------------------	--------------------	-------------------------------------	-----------------------------------

Date of conclusion of marriage or spousal relationship:

.....

Details of **previous** marriage(s) or permanent spousal relationship(s) (if any):

- Date and place of marriage/conclusion of spousal relationship:

.....

- Date and place of \*divorce/separation.

.....

\*Details about any parental rights and responsibilities (including maintenance obligations) in respect of children born from such marriage(s)/permanent spousal relationship(s), including legally adopted children:

.....

.....

Present residential address:

.....

.....

Since	Year	Month	Day
-------	------	-------	-----

Postal Address: .....

Suburb: ..... City:..... Code: .....

Tel No: (Home) ..... (Work) .....

Cellphone:.....

E-mail address: .....

Occupation: .....

Type of temporary residence visa held (if applicable): .....

Valid until: ..... Issuing office: .....

**Details of principal applicant's parents:****Father:**

Surname: .....

First name: .....

Date of birth: .....

Place of birth: ..... Country: .....

**Mother:**

Surname: .....

First name: .....

Maiden name:.....  
 Date of birth: ..... Place of birth: .....  
 Country: ..... Nationality at birth:.....

**Details of applicant's spouse:**

Title:..... Surname:.....  
 First name(s): .....  
 Maiden name: .....  
 Any other former surname(s): .....

Date of birth: Year 

--	--	--

 Month 

--	--

 Day 

--	--

Country of birth..... Nationality at birth.....

Present nationality:.....  
 Passport no.: ..... Expiry date: .....  
 Issuing authority of passport: .....

**Details of previous marriage(s) or permanent spousal relationship(s) (if any):**

- Date and place of marriage/conclusion of spousal relationship:  
 .....
- Date and place of \*divorce/separation:.....

Details about any custody or maintenance obligations in respect of children born from such  
 \*marriage(s)/permanent spousal relationship(s), including legally adopted children:

.....  
 .....

Present residential address:

.....  
 .....

Occupation:

.....

Type of temporary residence visa held (if applicable):

.....

Valid until:..... Issuing office:.....

**Details of spouse's parents:**

**Father:**

Surname: .....  
 First name(s): .....  
 Date of birth: ..... Place of birth: .....  
 Country:..... Nationality at birth: .....  
 Present nationality.....

**Mother:**

Surname: .....  
 First name(s): .....  
 Date of birth: .....  
 Place of birth: .....  
 Country:..... Nationality at birth: .....  
 Present nationality.....

**Details of biological-, step- and adopted children not included in the application:**

Surname	First name	Date of birth	Gender	Nationality



**Details of relatives or friends resident in South Africa:**

Surname	First name	Relationship	Identity number/ Permanent or Temporary residence permit number	Residential address	Telephone number

**Employment record of principal applicant (to cover full period of employment):**

Name of employer	Address	From (date)	To (date)	Nature of work

Occupations to be followed in the Republic-

- by principal applicant: .....; and
- by spouse: .....

Amount of funds to be transferred to the Republic-

- by principal applicant: .....; and
- by spouse: .....

Details of pension or private income-

- by principal applicant: .....; and
- by spouse: .....

Details of any other assets (e.g. property, investments, etc.)-

- of principal applicant: .....; and
- of spouse: .....

**Details of any family members remaining in your country of origin (spouse, children, parents, sisters, brothers):**

Surname & First Name(s)	Address	Relationship

**Full details of previous and current residential addresses (since 18th birthday or for the last ten years):****Principal applicant:**

From (month and year)	To (month and year)	Number and street name	City/Town	Country

**Spouse:**

From (month and year)	To (month and year)	Number and street name	City/Town	Country


**Details regarding applicant and (if applicable) spouse and children:**  
The following questions relate to you (the applicant), as well as to your spouse and children (if any), and must be answered 'YES' or 'NO'.

Have you or any of the persons concerned ever been-

- convicted of a criminal offence, even if such conviction is no longer on record against you or the persons concerned? .....
- declared insolvent? .....If yes, have you been rehabilitated?.....
- the subject of a civil action, including failure to fulfil child maintenance obligations?  
.....
- Is there a civil or criminal enquiry pending against you or any of the persons concerned?  
.....
- Have you or any of the persons concerned ever been refused entry into or been removed or deported from the Republic?..... if so, provide details:.....

**N.B. If the answer to any of the above questions is 'YES', provide full details below.**  
.....  
.....  
.....  
.....

**General information:**

Postal address and telephone number where you could be contacted in the Republic:  
.....  
.....

If your spouse is a South African citizen or permanent resident, please provide his/her employment details:.....

**Note:** Any incorrect or misleading information or false documents furnished in support of this application may result in the application being refused or, if the permanent residence permit has already been issued, that permit being withdrawn.

\*I/We, the undersigned, declare that-

- photograph(s) submitted in support of this application \*is/are a true reflection of the person(s) whose name(s) appear on the reverse side thereof;
- the details reflected in this application, as well as the documents submitted in support of this application, are true and correct; and
- it is \*my/our intention to permanently reside in the Republic.

.....

**Signature of applicant** .....  
(Parent(s) or legal guardian if main applicant is a minor child) **Date**

.....

**Signature of spouse** .....  
**Date**

ONE PASSPORT PHOTOGRAPH IN RESPECT OF EACH PARTY TO THE APPLICATION		
FOR OFFICIAL USE		
Supporting documents required for all categories of applicants:		
Document(s) to be submitted	Person(s) to submit document	Explanatory notes
Passport photograph.	All applicants.	A recent, passport-type, full face photograph.

Valid passport	All applicants.	Certified copies are acceptable.
Unabridged birth certificate, or extract from birth record.	All applicants.	Only original documents or authenticated copies thereof are acceptable.
Change of name or gender document (i.e. Statutory Declaration, Deed Poll or legal Adoption Certificate).	All applicants where applicable.	
Medical report.	All applicants.	The report shall not be older than six months at the time of submission.
Radiological report.	All applicants 12 years of age and older (excluding pregnant women).	The report shall not be older than six months at time of submission.
Police clearance certificate(s).	All applicants 18 years of age and older.	In respect of all countries of residence for one year or longer since the age of 18 years, including South Africa. Certificates may not be older than six months at the time of submission of this application.
Marriage certificate, or extract from marriage record/Proof of registration of customary marriage in terms of Recognition of Customary Marriages Act, 1998 (Act 120 of 1998), where applicable/Spousal affidavit. Documentary proof of cohabitation and extent to which the related financial responsibilities are shared by the parties.	All married applicants or parties to a spousal relationship.	
Divorce decree(s) or proof of legal separation and all relevant court orders regarding custody and maintenance of children and previous spouse(s).	All applicants who are divorced or legally separated.	Required irrespective of whether or not the person concerned has since remarried.
Written consent of both parents in the case of minor children where only one of the parents is applying.	Both parents.	
Death certificate of late spouse, where applicable.	All widowed persons.	

**Indicate whether or not the document(s) mentioned hereunder have been submitted:**

**Section 26(a) of the Act**

Proof of five year's continuous work permit status.	Yes	No
Proof of registration with professional body, board or council in the Republic, if applicable.		
Offer of permanent employment.		

**Section 26(b) of the Act**

Proof that applicant has been spouse of citizen or permanent resident for five years.	Yes	No
Declaration of support for the application by the spouse who is a citizen or permanent resident.	Yes	No
Identity document of the spouse who is the citizen or permanent resident. If the spouse is a permanent resident, a copy of his or her permanent residence permit must be submitted.	Yes	No

**Section 26(c) of the Act**

Consent of both parents and guardians, together with an undertaking to provide financial support to the applicant.	Yes	No
--	-----	----

**Section 26(d) of the Act**

An undertaking by the South African citizen parent(s) to provide the required financial support to the applicant.	Yes	No
---	-----	----

**Section 27(a) of the Act**

An offer of permanent employment.	Yes	No
An original clipping, not older than four months at the time of application, from the national printed media- (a) reflecting the full particulars of the relevant newspaper or magazine, as well as the date on which the advertisement was published; (b) stipulating the minimum qualifications and experience required to fill the position; (c) clearly define the position offered and the responsibilities to be performed; (d) measure at least 60 millimetres by 60 millimetres; and (e) state the closing date for the application		
Proof that the application falls within the specific professional category or within the specific occupational class contemplated in section 19(1) of the Immigration Act.	Yes	No

**Section 27(b) of the Act**

Proof that the applicant falls within the critical skills category as published from time to time by the Minister by notice in the <i>Gazette</i> in the form of a certificate from the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act or the relevant Department confirming the skills or qualifications of the applicant.	Yes	No
If required by law, a certificate of registration with the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act.	Yes	No
Proof of post qualification experience of at least five years.	Yes	No
Testimonials from previous employers.	Yes	No
A comprehensive <i>curriculum vitae</i> .	Yes	No
A letter of motivation indicating that the critical skills possessed by the applicant will be to the benefit of the South African environment in which he/she intends to operate and which relates to the critical skill in question.		

**Section 27(c) of the Act****In respect of an application by a foreigner who intends to establish a business or invest in a business that is not established in the Republic**

A certificate issued by a chartered accountant registered with the South African Institute of Chartered Accountants or a professional accountant registered with the South African Institute of Professional Accountants to the effect that- (a) at least an amount in cash as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> , is available; or (b) at least an amount in cash and capital as determined from time to time by the Minister, after consultation with the Minister of Trade and Industry, by notice in the <i>Gazette</i> , is available to be invested in the Republic.	Yes	No
(a) A business plan outlining the feasibility of the business, both in the short and long term; and (b) an undertaking that at least 60% of the total staff complement employed in the operations of the business are or shall be citizens or permanent residents employed permanently in various positions.		
An undertaking to register with the South African Revenue Service.	Yes	No
Proof of registration with the relevant professional body, board or council recognised by SAQA in terms of section 13(2)(i) of the National Qualifications Framework Act, where applicable.		

**In respect of an application by a foreigner who has established a business or invested in an existing business in the Republic**

A certificate issued by a chartered accountant registered with the South African Institute of Chartered Accountants or a professional accountant registered with the South African Institute of Professional Accountants to the effect that- (a) at least an amount in cash as determined from time to time	Yes	No
--	-----	----

(b) by the Minister, by notice in the <i>Gazette</i> has been invested in the business; and proof that at least 60% of the total staff complement employed in the operations of the business are citizens or permanent residents employed permanently in various positions.		
--	--	--

Proof of registration with the- (a) South African Revenue Service; (b) Unemployment Insurance Fund; (c) Compensation Fund for Occupational Injuries and Diseases; (d) Companies and Intellectual Properties Commission (CIPC); and (e) The relevant professional body, board or council recognised by SAQA in terms of section 13(2)(i) of the National Qualifications Framework Act.	Yes	No
Financial statement in respect of the preceding financial year.	Yes	No
A partnership agreement, if applicable.	Yes	No

**Section 27(d) of the Act**

Proof of five year's continuous refugee status in the Republic.	Yes	No
Certification from the Standing Committee for Refugee Affairs that the applicant will remain a refugee indefinitely.	Yes	No
An affidavit regarding aliases used for refugee status application(s) by principal applicant or family members, if applicable.	Yes	No

**Section 27(e) of the Act**

Proof of a pension fund or an irrevocable retirement annuity or a net worth or a combination of assets realising the minimum amount per month as determined from time to time by the Minister by notice in the <i>Gazette</i> .	Yes	No
---	-----	----

**Section 27(f) of the Act**

Proof of a net worth in the amount determined from time to time by the Minister by notice in the <i>Gazette</i> .	Yes	No
Written undertaking to make payment in the amount determined from time to time by the Minister by notice in the <i>Gazette</i> to the Director-General upon approval of the application.	Yes	No

**Section 27(g) of the Act**

Proof of kinship in the first step between the applicant and the citizen or permanent resident.	Yes	No
---	-----	----

**FORM 19**  
**DECLARATION OF FOREIGNER AS UNDESIRABLE PERSON**  
 [Form 19 substituted by GN R1328 of 29 November 2018 (wef 1 December 2018).]

(DHA-46) Form 19



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**DECLARATION OF FOREIGNER AS UNDESIRABLE PERSON**  
**[Section 7(1)(g) read with section 30(1); Regulations 27(1) and 39(1)]**

To: .....

Passport No: .....

In terms of section 30(1) of the Act, you are hereby declared an undesirable person in the Republic due to the following reason(s):

- \* (a) You are or are likely to become a public charge;
- \* (b) You have been identified as such by the Minister;
- \* (c) You have judicially been declared incompetent;
- \* (d) You are an unrehabilitated insolvent;
- \* (e) You have been ordered to depart in terms of the Act;
- \* (f) You are a fugitive from justice;
- \* (g) You have previous criminal convictions without the option of a fine for conduct which would be an offence in the Republic; or
- \* (h) You have overstayed by \_\_\_\_\_ days, at a time.

If you disagree with the aforesaid declaration, you may, in terms of section 8(4) of the Act, make written representations to the Director-General at [Overstayappeals@dha.gov.za](mailto:Overstayappeals@dha.gov.za) within 10 working days of receipt of this notice to review this declaration.

Alternatively, you may apply to the Minister at [Overstayappeals@dha.gov.za](mailto:Overstayappeals@dha.gov.za) to waive any of the grounds of undesirability in terms of section 30(2) of the Act if you are able to show good cause.

.....  
Director-General.....  
Place.....  
Date

Place: .....

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname: .....

Appointment number: .....

Rank/position: .....

Office: ..... Province: .....

**SUPERVISOR'S PARTICULARS**

Name and surname: .....

Rank/position: .....

Contact No.: Tel: .....

**ACKNOWLEDGEMENT OF RECEIPT**

I acknowledge receipt of the original of this notice.

I \*wish/do not wish to make representations within 10 working days from receipt of this notice to the Director-General in terms of section 8(4) of the Act to review the declaration.

I understand that I am entitled to make representations to the Minister showing good cause for the Minister to waive the grounds of undesirability in terms of section 30(2) of the Act.

.....  
Signature of recipient of this notice.....  
Date

Place:.....

Left thumbprint

.....  
Signature of witness.....  
Date**\*Delete whichever is not applicable****CERTIFICATE BY INTERPRETER**

I, ..... (name(s) and surname) of  
 ..... (\*business/residential address) and telephone  
 number..... and cell phone number ..... hereby confirm that I have  
 mastered..... (state language) and that I have explained to.....  
 (name(s) and surname of foreigner) the contents of this notice in the said language and that I am satisfied  
 that the said foreigner fully understands it.

.....  
**Signature of interpreter**.....  
**Place**.....  
**Date**

**FORM 20**  
**AUTHORISATION FOR ILLEGAL FOREIGNER TO REMAIN IN REPUBLIC PENDING**  
**APPLICATION FOR STATUS**

(DHA-1759) **Form 20**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**

**AUTHORISATION FOR ILLEGAL FOREIGNER TO REMAIN IN REPUBLIC PENDING APPLICATION FOR STATUS**

[Section 7(1)(g) read with section 32(1); Regulation 30(2)]

**Particulars of the holder of this authorisation**

Full name(s) and surname:.....

Date of birth:..... Passport number:.....

The holder of this authorisation may temporarily reside in the Republic in the Magisterial District or Municipal Area of ..... pending the outcome of an application for a status. The authorisation is valid until.....

As an illegal foreigner you will be listed as an undesirable person in terms of section 30(1)(h) of the Act, should you depart from the Republic prior to the finalisation of your application for status.

.....  
**Director-General**

.....  
**Date**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position:.....

Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....

Rank/position:.....

Contact No.: Tel:.....

This authorisation lapses as soon as the final decision regarding the holders' status is conveyed to him or her.



**FORM 21**  
**ORDER TO ILLEGAL FOREIGNER TO DEPART FROM REPUBLIC**

(DHA-1684) **Form 21**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**ORDER TO ILLEGAL FOREIGNER TO DEPART FROM REPUBLIC**  
**[Section 7(1)(g); Regulation 30(4)]**

To: ..... (name(s) and surname)

Date of birth..... Passport No.....

Expiry date:..... Place of issue:.....

Residential address:.....

Nationality:..... Country of origin: .....

You are hereby notified that as an illegal foreigner in contravention of the Act, you are guilty of an offence for which you may be charged in a court of law.

However, as you have undertaken to leave the Republic voluntarily, you are hereby ordered to leave the Republic by.....(time) on ...../...../20..... failure of which you shall be arrested and detained pending your deportation.

**Declaration by immigration officer**

..... (name(s) and surname) hereby declare that I am satisfied that the holder hereof has complied with the provisions of regulation 30(4).

Signature of immigration officer

Place

Date

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname: .....

Appointment number: .....

Rank/position.....

Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname: .....

Rank/position.....

Contact No.: Tel:.....

**ACKNOWLEDGEMENT OF RECEIPT**

I acknowledge receipt of this notice.

Signature of illegal foreigner

Place

Date

Witness:

Name and surname..... Signature:.....

**CERTIFICATE BY INTERPRETER**

I,..... (*name(s) and surname*) of  
..... (*\*business/residential address*) with telephone  
number..... and cell phone number ..... hereby confirm that I have  
mastered..... (*state language*) and that I have explained to.....  
(*name(s) and surname of foreigner*) the contents of this notice in the said language and that I am satisfied  
that the said foreigner fully understands it.

.....  
**Signature of interpreter**.....  
**Place**.....  
**Date****\*Delete which is not applicable**

**FORM 22**  
**NOTICE BY IMMIGRATION OFFICER TO PERSON TO PRODUCE ANY THING IN**  
**HIS OR HER POSSESSION OR IN HIS OR HER CUSTODY OR UNDER HIS OR HER**  
**CONTROL**

(DHA-1720) Form 22



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**

**NOTICE BY IMMIGRATION OFFICER TO PERSON TO PRODUCE ANY THING IN HIS OR HER**  
**POSSESSION OR IN HIS OR HER CUSTODY OR UNDER HIS OR HER CONTROL**

[Section 7(1)(g) read with section 33(4)(b); Regulation 32(2)]

To:..... (name and surname) with identity document /  
 passport number.....

Residential address:

Physical work address:

.....	.....	.....
.....	.....	.....
.....	.....	.....

**YOU ARE HEREBY** called upon in terms of section 33(4)(b) of the Act to produce the article(s) *infra*  
 to..... (name and surname of immigration officer) at  
 ..... (physical address) on..... (date)  
 at..... (time).....

Article	Description	No. of articles
.....	.....	.....
.....	.....	.....
.....	.....	.....

**Reason(s)** why the said article(s) is/are to be produced:

.....  
 .....  
 .....

.....  
**Signature of \*immigration**  
**officer/sheriff**

.....  
**Appointment no**

.....  
**Date**

\*Delete which is not applicable

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....  
 Appointment number:.....  
 Rank/position.....  
 Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....  
 Rank/position.....  
 Contact No.: Tel: .....

**ACKNOWLEDGEMENT OF RECEIPT**

I acknowledge receipt of this notice.

.....  
**Signature of recipient**

.....  
**Initials and surname**

.....  
**Date**

**FORM 23**  
**NOTICE BY IMMIGRATION OFFICER TO PERSON TO APPEAR BEFORE DIRECTOR-GENERAL**

(DHA-1720) **Form 23**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**NOTICE BY IMMIGRATION OFFICER TO PERSON TO APPEAR BEFORE DIRECTOR-GENERAL**  
**[Section 7(1)(g) read with section 33(4)(c); Regulation 32(3)]**

To:..... (name(s) and surname) with identity document /  
 passport number.....

Residential address:

.....  
 .....  
 .....  
 .....

Physical work address:

.....  
 .....  
 .....  
 .....

Tel No.:.....(work/home)

Cell No.:.....

Alternative Contact:..... (next of kin, friend's name and surname)

Tel No.:.....(work/home)

Cell No.:.....

E-mail address:.....

**YOU ARE HEREBY** called upon in terms of section 33(4)(b) of the Act to produce the article(s) infra  
 to.....(name and surname of immigration officer) at  
 ..... (physical address) on.....(date)  
 at.....(time).....

**Reason(s)** why you are called upon to appear before the Director-General:

.....  
 .....

A copy hereof was personally handed to the aforementioned on...../...../.....(date)  
 at ..... (place) and the import thereof \*explained to him or her/  
 delivered at his/her last known address.

.....  
**Signature of \*immigration**  
**officer/sheriff**

.....  
**Appointment no**

.....  
**Date**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position.....

Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....

Rank/position.....

Contact No.: Tel: .....

A copy hereof was personally handed to the aforementioned on.....(date) and the import thereof  
 explained to him or her/ delivered at his/her last known address\*.

Place: .....

.....  
**Signature of \*immigration  
 officer/sheriff**

.....  
**Appointment no**

.....  
**Date**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position.....

Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....

Rank/position.....

Contact No.: Tel: .....

**ACKNOWLEDGEMENT OF RECEIPT**

I acknowledge receipt of the original of this notice.

.....  
**Signature of recipient**

.....  
**Initials and Surname**

.....  
**Date**

**\*Delete which is not applicable**

## FORM 24 ENTRY AND SEARCH WARRANT

(DHA-1722) Form 24



### DEPARTMENT OF HOME AFFAIRS REPUBLIC OF SOUTH AFRICA ENTRY AND SEARCH WARRANT

**[Section 7(1)(g) read with section 33(5)(a) and (b); Regulation 32(4)]**

**TO:** ..... (name(s) and surname of immigration officer responsible for the execution of the entry and search warrant).

Whereas it appears to me from information received under oath that there are reasonable grounds to believe that, within the Magisterial District of ..... there is in or upon the premises at .....

\* (i) an illegal foreigner; or

\* (ii) something which relates to the employment, training, occupation or residence on such premises of an illegal foreigner in violation of the Act,

**YOU ARE THEREFORE** authorised to enter the above-mentioned premises during \*day time/any time/night time/during the hours of ..... to ..... to search for and to-  
(Mark with YES or NO in the applicable block)

(a)	interrogate any person found in or on such premises;	
(b)	examine any thing in or upon such premises;	
(c)	request from the person who is in control of such premises or in whose possession or under whose control any thing is when it is found, or who is upon reasonable grounds believed to have information with regard to such thing, an explanation or information pertaining to that thing and make copies of or extracts from any such thing found upon or in such premises,	
(d)	apprehend an illegal foreigner, subject to section 34(1).	

Given under my hand at ..... on this ..... day of ..... 20....

Magistrates Court

.....  
**Signature**

**Designation:** .....

**\*Delete which is not applicable**

Official stamp

### REVERSE SIDE OF FORM 24 ACKNOWLEDGEMENT

I ..... (name and surname) in my capacity as ..... of the premises, hereby acknowledge that the premises referred to in the entry and search warrant was left \*in the condition it was found/with the following breakages:

.....  
.....  
.....

.....  
**Signature of recipient**

.....  
**Initials and Surname**

.....  
**Date**

## FORM 25 WARRANT OF ARREST

(DHA1760) Form 25



### DEPARTMENT: HOME AFFAIRS REPUBLIC OF SOUTH AFRICA WARRANT OF ARREST

[Section 7(1)(g) read with section 33(5)(b) and 33(6); Regulation 32(4)]

Inspectorate office/Port of entry	Ref. no.	Appointment no.
Name		
Address		
Gender		Age

**(Only the immigration officer whose particulars appear above is authorised to execute this warrant.)**

To: The Magistrate, District of .....

#### APPLICATION UNDER SECTION 33(5)(b) OF THE ACT FOR WARRANT OF ARREST

Application is hereby made for the issue of a warrant for the arrest of  
 ..... (*name and surname*), with passport number .....  
 on a charge of ..... there being, from information taken upon oath  
 a reasonable suspicion that \*he/she committed the alleged offence on or about the ..... day of  
 ..... 20 in the district of ..... the said ..... is presently  
 suspected to be within the district of .....

.....  
 Signature of immigration officer

.....  
 Date

#### IMMIGRATION OFFICER'S PARTICULARS

Name and surname:.....  
 Appointment number:.....  
 Rank/position.....  
 Office:..... Province:.....

#### SUPERVISOR'S PARTICULARS

Name and surname:.....  
 Rank/position.....  
 Contact No.: Tel: .....

#### WARRANT OF ARREST

Whereas from the written application made by ..... (*name and surname of immigration officer*) there is a reasonable suspicion that .....  
 (*name and surname of person to be arrested*) of .....  
 (residential address) on the ..... day of ..... 20..... contravened the Act by  
 ..... you are hereby directed to arrest \*him/her and to bring \*him/her before the court  
 (*name of the court* ..... at ..... *Magisterial Court*).

The above-mentioned person/suspect shall be informed that \*he/she has the right to consult with a legal practitioner of his or her choice, and if he or she cannot afford a legal practitioner, that he or she may apply for legal aid at the local Legal Aid Office.



Given under my hand at..... on this.....day of .....20.....		
Magistrate's Court		
.....	.....	<i>Official stamp</i>
<b>Signature of Magistrate</b>	<b>Date</b>	
<b>*Delete which is not applicable</b>		

## FORM 26 RECEIPT OF ITEMS SEIZED

(DHA-1723) Form 26



### DEPARTMENT: HOME AFFAIRS REPUBLIC OF SOUTH AFRICA RECEIPT OF ITEMS SEIZED

[Section 7(1)(g) read with section 33(5)(c); Regulation 32(5)]

**This form is to be completed in triplicate**

I, ..... (name and surname of immigration officer) hereby  
acknowledge that I have seized the following items in terms of section 33(5)(c) of the Act from the premises of  
..... in the district of  
.....

Item	Description	Quantity
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

Total no of items seized:.....

Confirmed by:..... (name(s) and surname of person in charge of premises) in his or  
her capacity as .....

.....  
**Signature of person in charge of premises**

Signed at ..... on this ..... day of ..... 20.....

.....  
**Signature of immigration officer**

**Reference/File number:** .....

*Official stamp*

#### IMMIGRATION OFFICER'S PARTICULARS

Name and surname:.....

Appointment number:.....

Rank/position:.....

Office:..... Province:.....

#### SUPERVISOR'S PARTICULARS

Name and surname:.....

Rank/position:.....

Contact No.: Tel: .....

**ACKNOWLEDGEMENT OF RECEIPT OF ITEMS RETURNED**

I hereby acknowledge receipt of the items that were seized and removed  
from..... (premises) on  
...../...../..... (date) and confirm that all items have been received in good order or  
.....

.....  
**Signature of person in charge of premises**

.....  
**Date:**

**FORM 27**  
**WARRANT FOR SEIZURE AND REMOVAL**

(DHA-1761) Form 27



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**WARRANT FOR SEIZURE AND REMOVAL**

**[Section 7(1)(g) read with section 33(5)(c); Regulation 32(5)]**

TO: ..... (first name and surname of immigration officer responsible for the execution of the seizure and removal warrant).

Whereas it appears to me from information received under oath that there are reasonable grounds to believe that, within the Magisterial District of ..... in or upon the premises situated at ....., the following documentation or thing which-

- \* (i) is concerned with or is upon reasonable grounds suspected of being concerned with; or
- \* (ii) contains or is on reasonable grounds suspected of containing information with regard to,

any matter which is the subject of an investigation in terms of the Act:

..... (mention documentation),

YOU ARE THEREFORE authorised to enter the above-mentioned premises during \*day time/any time/night time/during the hours of ..... to ..... to seize and remove the documents or items mentioned in the receipt, which receipt shall be handed to the person from whom the items mentioned above are to be seized and removed.

Given under my hand at ..... on this ..... day of ..... 20.....

Magistrates Court

.....  
**Signature**

**Designation:** .....

Official stamp

**\*Delete which is not applicable**

**FORM 28**  
**WARRANT OF DETENTION OF ILLEGAL FOREIGNER**

(DHA-1725) **Form 28**

**DEPARTMENT: HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**WARRANT OF DETENTION OF ILLEGAL FOREIGNER**  
**[Section 7(1)(g) read with section 34(1); Regulation 33(1)]**

To: **\*Station Commissioner/Head of Correctional Services or Detention Facility**

As..... name and surname of illegal foreigner)  
 has made \*himself/herself liable to \*deportation/removal from the Republic and for detention pending such  
 \*deportation/removal in terms of section \*34(1) or 34(5)/34(8) of the Act, you are hereby ordered to detain him  
 or her until such time \*he/she is \*deported/removed from the Republic.

.....  
**Signature of immigration officer**

.....  
**Date**

*Official stamp*

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position:.....

Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....

Rank/position:.....

Contact No.: Tel :.....

**NB: No release may be effected without the written authority of an immigration officer by means of a warrant of release referred to in section 34(7) of the Act.**

**\*Delete which is not applicable**

## FORM 29 NOTIFICATION OF DEPORTATION

(DHA-1724) Form 29



**DEPARTMENT OF HOME AFFAIRS  
REPUBLIC OF SOUTH AFRICA  
NOTIFICATION OF DEPORTATION  
[Section 7(1)(g) read with section 34(1)(a); Regulation 33(2)]**

To: ..... (name and surname of illegal foreigner)

As you are an illegal foreigner, you are hereby notified that you are to be deported to your country of origin, namely

In terms of section 34(1)(a) and (b) of the Act, you have the right to-

- (a) appeal the decision to the Director-General in terms of section 8(4) of the Act within 10 working days from date of receipt of this notice; or
- (b) at any time request the officer attending to you to have your detention for the purpose of deportation confirmed by a warrant of the court.

**NB: Should you choose not to exercise the rights mentioned above, you shall be detained pending your deportation. You will not be allowed to return to the Republic, unless you have obtained the necessary lawful authority in this regard.**

### ACKNOWLEDGEMENT OF RECEIPT OF NOTIFICATION OF DEPORTATION

I hereby acknowledge receipt of the original notification of deportation in which my rights in terms of section 34(1)(a) and (b) of the Act were explained to me.

After due consideration, I have decided to-

Await my deportation at the first reasonable opportunity, whilst remaining in custody.

Yes ☐ No ☐

Appeal the decision to deport me.

Yes ☐ No ☐

Have my detention confirmed by a warrant of the court.

Yes ☐ No ☐

.....  
**Signature of detainee**

.....  
**Date**

Place: .....

.....  
**Signature of immigration officer**

.....  
**Date**

### IMMIGRATION OFFICER'S PARTICULARS

Name and surname: .....

Appointment number: .....

Rank/position: .....

Office: ..... Province: .....

### SUPERVISOR'S PARTICULARS

Name and surname: .....

Rank/position: .....

Contact No.: Tel: .....

**CERTIFICATE BY INTERPRETER**

I, ..... (*name(s) and surname*) of  
..... (*\*business/residential address*) and telephone  
number..... and cell phone number ..... hereby confirm that I have  
mastered..... (*state language*) and that I have explained to.....  
(*name(s) and surname of detainee*) the contents of this notice in the said language and that I am satisfied  
that the said foreignerfully understands it.

.....  
**Signature of interpreter**.....  
**Place**.....  
**Date****\*Delete which is not applicable**

**FORM 30**  
**CONFIRMATION BY COURT OF DETENTION FOR PURPOSES OF DEPORTATION**

(DHA-1725) Form 30



**DEPARTMENT: HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**CONFIRMATION BY COURT OF DETENTION FOR PURPOSES OF DEPORTATION**  
**[Section 7(1)(g) read with section 34(1)(b); Regulation 33(3)]**

To: **\*Station Commissioner/Head of Prison or Detention facility**

.....  
 .....  
 .....

As ..... (name and surname) has made \*himself/herself liable to  
 \*deportation/removal from the Republic and for detention pending such \*deportation/removal, in terms of  
 section \*34(1)/34(5)/34(8) of the Act, you are hereby ordered to detain him or her until such time \* he/she is  
 \*deported/removed from the Republic.

Given under my hand at ..... on this ..... day of ..... 20.....

**Magistrates Court**

.....  
**Signature**

**Designation:** .....

*Official stamp*

**NB: No release may be effected without a warrant of release  
 contemplated in section 34(7) of the Act.**

**\*Delete which is not applicable**



**FORM 31**  
**NOTICE TO A FOREIGNER OF THE INTENTION TO APPLY TO COURT FOR THE**  
**EXTENSION OF HIS/HER DETENTION**

[Form 31 substituted by GN R1328 of 29 November 2018 (wef 1 December 2018).]

(DHA-1726) **Form 31**



**DEPARTMENT: HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**[Section 7(1)(g) read with section 34(1)(d); Regulation 33(4)(a)]**

To: ..... (name and surname of detainee)

detained at ..... (name of detention facility).

You are hereby notified that in view of the fact that your detention pending the execution of the warrant for your deportation to ..... (destination) issued on ...../...../..... (date) is likely to exceed 30 calendar days on ...../...../..... (date) for the reasons mentioned in the affidavit on the reverse side of this notice, I am, in terms of section 34(1)(d) of the Act, submitting the matter for consideration to the Magistrate at ..... (place) on or before ...../...../..... (date).

You are entitled to make a written representation to a magistrate of the court who will rule on your extended detention and you are requested to provide me with such representations on or before ..... (date) If you require assistance, you may approach the head of the institution where you are being detained.

.....  
**Signature of immigration officer**

Official stamp

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname: .....

Appointment number: .....

Rank/position: .....

Office: ..... Province: .....

**SUPERVISOR'S PARTICULARS**

Name and surname: .....

Rank/position: .....

Contact No.: Tel: .....

**CERTIFICATE BY INTERPRETER**

I, ..... (name(s) and surname) of  
 ..... (\*business/residential address) hereby confirm that I have  
 mastered..... (state language) and that I have explained to.....  
 (name(s) and surname of detainee) the contents of this notice in the said language and that I am satisfied that  
 the said foreigner fully understands it.

.....  
**Signature of interpreter**

.....  
**Place**

.....  
**Date**

\*Delete which is not applicable

**REVERSE SIDE OF FORM 31**

**AFFIDAVIT**

I, ..... (name and surname of deponent) \*state herewith under oath/solemnly declare that-

- (a) I am a duly appointed immigration officer stationed at ..... (place)
- (b) I have ordered the detention of ..... (name and surname of detainee) because the warrant for his or her removal from the Republic issued by me on ...../...../..... (date) could not be executed immediately due to.....  
..... (provide reasons);
- (c) the detention of the said detainee was considered reasonable and necessary, as  
.....
- (d) it is necessary that the said detainee be detained for a further period of .....  
because.....

I append hereto certified copies of the following documentation as proof of my endeavours to expedite the deportation of the said detainee:

- (a) .....
- (b) .....
- (c) .....

Signed at..... on this.....day of.....20.....

.....  
**Signature of immigration officer**

.....  
**Appointment number**

Thus signed and \*sworn/solemnly affirmed before me on this.....day of.....20.....

\*Delete whichever is not applicable



**CERTIFICATE OF OATH/AFFIRMATION**

I, ..... (name and surname of Commissioner/designation)  
....., hereby certify that before administering the prescribed \*oath/solemn declaration, you put the following questions to the deponent and noted \*his/her reply in his/her presence:

**QUESTIONS**

**ANSWER**

- (a) Do you know and understand the contents of the above declaration Yes/No
- (b) Have you any objection to taking the prescribed oath? Yes/No
- (c) Do you regard the prescribed oath as binding on your conscience? Yes/No

The deponent has acknowledged that he/she knows and understands the contents of the declaration; this declaration was duly \*sworn to/solemnly affirmed before me and the deponent's signature was

appended thereon in my presence.

Date: ..... Signed: .....  
Place: ..... Address: .....

**FORM 32**  
**APPLICATION TO COURT FOR EXTENSION OF DETENTION AND**  
**AUTHORISATION BY COURT FOR THAT EXTENSION**

(DHA-1727) Form 32



**DEPARTMENT: HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**APPLICATION TO COURT FOR EXTENSION OF DETENTION AND AUTHORISATION BY COURT FOR THAT**  
**EXTENSION**

[Section 7(1)(g) read with section 34(1)(d); Regulation 33(4)(c) and (6)]

To: **The clerk of the Court:**

Re: Extension of detention of ..... (name(s) and surname of  
detainee) detained at ..... (place).

Please refer this matter for consideration to the Magistrate in terms of section 34(1)(d) of the Act read with Regulation 33(6).

The following documents are attached:

- (a) Certified copy of the warrant of detention of .....  
(name and surname of detainee) issued on ..... (date);
- (b) Notification to the detainee as contemplated in Regulation 33(4)(a);
- (c) affidavit of the immigration officer; and
- (d) representation by the said detainee (if any).

Signed at ..... on this ..... day of ..... 20.....

**Immigration officer:**

Official stamp

.....  
**Signature**                      **Appointment No**                      **Place**                      **Date**

**DECISION BY MAGISTRATE**

\*After perusing the documentation referred to above, I hereby-

- (a) confirm the application for the extended detention of .....  
(name and surname of detainee);
- (b) refuse the application for the extended detention of .....  
(name and surname of detainee);
- (c) make the following order in addition to the confirmation or refusal above:  
.....  
.....

Given under my hand at ..... on this ..... day of ..... 20.....

**Magistrates Court**

Signature of Magistrate

.....  
Designation:

\*Delete which is not applicable

**FORM 33**  
**WARRANT OF DETENTION OF PERSON SUSPECTED OF BEING AN ILLEGAL FOREIGNER**

(DHA-1710) FORM 33



**DEPARTMENT: HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**WARRANT OF DETENTION OF PERSON SUSPECTED OF BEING AN ILLEGAL FOREIGNER**  
**[Section 7(1)(g) read with sections 34(2) and 41(1); Regulation 33(7)]**

To: \*Station Commissioner/Head of Correctional Services Centre

Whereas..... (name and surname) is, for the reasons stated in the attached affidavit, suspected of being an illegal foreigner who has failed to satisfy me  
 ..... (name and surname of \*immigration officer/police officer) in terms of section 41(1) of the Act that he/she is entitled to be in the Republic; and whereas it is deemed necessary to detain the said person for the following reasons:

.....  
 .....  
 The following steps were taken by an immigration officer before detention to assist the person to prove that he or she is entitled to be in the Republic:

(a) All Departmental systems were checked:

Yes

☐

No

☐

(b) Visited the address given by the suspect to confirm identity. Yes

☐

No

☐

You are hereby ordered to detain the said person pending an investigation to verify his or her identity or status. A copy of this detention warrant was handed to the immigration officer stationed at.....  
 (Inspectorate office) on ...../...../.....(date) at..... (time)

Immigration officer:

.....  
Signature

Official stamp

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....  
 Appointment number:.....  
 Rank/position:.....  
 Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....  
 Rank/position:.....

Contact No.: Tel: .....

**FORM 34**  
**ORDER TO ILLEGAL FOREIGNER TO DEPOSIT A SUM TO COVER EXPENSES**  
**RELATING TO DEPORTATION, DETENTION, MAINTENANCE AND CUSTODY**

(DHA-1728) **FORM 34**

DEPARTMENT OF HOME AFFAIRS  
 REPUBLIC OF SOUTH AFRICA

**ORDER TO ILLEGAL FOREIGNER TO DEPOSIT A SUM TO COVER EXPENSES RELATING TO**  
**DEPORTATION, DETENTION, MAINTENANCE AND CUSTODY**  
**[Section 7(1)(g) read with section 34(3); Regulation 33(8)(a)]**

**A TO:** ..... (name and surname of illegal foreigner).

**Whereas-**

- (a) you are to be deported from the Republic under a warrant of deportation as an illegal foreigner; and
- (b) the consequential expenses of your deportation are calculated as follows:  
 Actual costs of deportation: .....  
 Actual costs of detention: .....  
 Actual costs of maintenance: .....  
 Total: .....and
- (c) section 34(3) of the Act empowers me to require from you to deposit with the Department a sum of money sufficient to cover the said expenses, you are hereby ordered to deposit the amount of ..... with the Department at ..... (place) on or before ..... (date)

**PLEASE TAKE NOTE** that should you fail to deposit the said sum of money on or before the aforementioned date, you shall be guilty of an offence and liable on conviction to a fine not exceeding ..... or to imprisonment not exceeding 12 months.

Furthermore, please take note that a copy of the order will be filed with the clerk of the court in the district of ..... whereafter the normal procedure pertaining to civil action shall apply.

**Immigration officer's name:**

.....  
**Signature**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname: .....

Appointment number: .....

Rank/position: .....

Office: ..... Province: .....

**SUPERVISOR'S PARTICULARS**

Name and surname: .....

Rank/position: .....

Contact No.: Tel: .....

**B TO THE CLERK OF THE COURT**

As the illegal foreigner mentioned above has failed to comply with the order, you are hereby requested to please record this order as a judgment of the court and complete the endorsement in Part C of this Form.

You are further requested to return two completed copies of Part C of this Form to me within..... (days)

**Immigration officer:**

.....

**Signature**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname: .....

Appointment number: .....

Rank/position.....

Office: ..... Province: .....

**SUPERVISOR'S PARTICULARS**

Name and surname: .....

Rank/position.....

Contact No.: Tel: .....

**C TO: ..... (name(s) and surname of immigration officer)**

(a) Order entered as a judgement of the Court on...../...../..... (date)

(b) Judgement number: .....

.....  
**Signature of clerk of the Court**

.....  
**Date**

*Official stamp*

**FORM 35**  
**WARRANT FOR REMOVAL OF DETAINED ILLEGAL FOREIGNER**

(DHA-515) Form 35



**DEPARTMENT: HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**WARRANT FOR REMOVAL OF DETAINED ILLEGAL FOREIGNER**  
**[Section 7(1)(g) read with section 34(7); Regulation 33(9)(a)]**

**TO: Person in charge of correctional services or detention facility**

As .....first name(s) and surname), whose fingerprints appear on the reverse side of this Form, has made \*himself/herself liable to removal from the Republic, you are hereby requested to deliver \*him/her into my custody. Removal from the Republic shall be affected via ..... (port of entry) and the responsible immigration officer or police officer at that port of entry shall, before the removal of the detainee, impress the left and right thumbprints of the detainee in the space provided hereunder and certify that the prints were taken by him or her.

**Signature of immigration officer..... Date.....**

**Reference no.:** .....

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....  
 Appointment number:.....  
 Rank/position:.....  
 Office:..... Province: .....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....  
 Rank/position:.....  
 Contact No.: Tel: .....

**CERTIFICATE BY IMMIGRATION OFFICER AT PORT OF ENTRY**

I hereby confirm that the above-mentioned person was removed from the Republic on...../...../..... (date) to ..... (country) via ..... (port of entry)  
 I also confirm that \*his/her left and right thumbprints were taken by me.

**LEFT THUMBPRINT**

*RIGHT THUMBPRINT*

**IMMIGRATION OFFICER'S PARTICULARS**

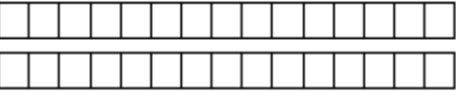
Name and surname:.....  
 Appointment number:.....  
 Rank/position:.....  
 Port of entry:.....

*Departure stamp*

**HEAD OF PORT OF ENTRY/SUPERVISOR'S PARTICULARS**

Name and surname:.....  
 Rank/position:.....



REVERSE SIDE OF FORM 35 FINGERPRINT FORM/TRAVEL IDENTITY OF DEPORTEE					
<b>NOTIFICATION OF DEPORTATION OF ILLEGAL FOREIGNER</b>  <i>Fingerprints may only be taken by an official of the Department of Home Affairs.</i>  <i>PLEASE NOTE: Should a finger be missing, deformed or so injured that the impression cannot be taken, this fact should be noted in the space provided for that impression.</i>		<b>Classification</b>			
		<div style="text-align: center;">  <p><i>Identity size photo of illegal foreigner to be deported</i></p> </div>			
R thumb	R index	R middle	R ring	R little finger	
L thumb	L index	L middle	L ring	L little finger	
<b>FOR OFFICIAL USE:</b> <b>FINGERPRINTS TAKEN BY:</b> <b>(PLEASE PRINT)</b> <b>IDENTITY NUMBER:</b> <b>PCN NUMBER:</b>					
		<b>REGISTERING FINGERS</b>			
		<b>LEFT HAND</b>		<b>RIGHT HAND</b>	

**FORM 36**  
**WARRANT FOR RELEASE OF DETAINED ILLEGAL FOREIGNER**

(DHA-557) **Form 36**

**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**WARRANT FOR RELEASE OF DETAINED ILLEGAL FOREIGNER**  
**[Section 7(1)(g) read with section 34(7); Regulation 33(9)(b)]**

To: **PERSON IN CHARGE OF CORRECTIONAL FACILITY OR DETENTION FACILITY**

Name(s) and surname .....

Name of correctional services /detention facility .....

You are hereby ordered to release the following illegal foreigner(s) presently being detained by you:

Surname	First name(s)	Passport No

Reasons for release:

.....  
 .....  
 .....  
 .....

.....  
**Signature of \*immigration officer/police officer**

**Official stamp**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position.....

Office:..... Province:.....

**ENDORSEMENT BY SUPERVISOR SUPPORTING THE RELEASE**

**Supported/Not supported**

Signature: .....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....

Rank/position.....

Contact No.: Tel: .....

**\*Delete which is not applicable**

**FORM 37**  
**NOTIFICATION TO A PERSON AT A PORT OF ENTRY THAT HE OR SHE IS AN**  
**ILLEGAL FOREIGNER AND IS REFUSED ADMISSION**

(DHA-1694) Form 37



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**NOTIFICATION TO A PERSON AT A PORT OF ENTRY THAT HE OR SHE IS AN ILLEGAL FOREIGNER**  
**AND IS REFUSED ADMISSION**

**[Section 7(1)(g) read with sections 34(8) and 35(10); Regulations 33(10) and (14)]**

To: ..... (name and surname of illegal foreigner)

In terms of section 8(1) of the Act, you are hereby notified that you do not qualify for admission into the Republic as-

- \* (a) you have been declared an undesirable person in terms of the provisions of section 30(1) of the Act;
- \* (b) you are a prohibited person in terms of the provisions of section 29 of the Act by virtue of the fact that you-
  - \* (i) are infected with or carrying the following \*disease/virus: ..... (name of disease or virus);
  - \* (ii) have a warrant outstanding or a conviction has been secured in respect of ..... (name of offence);
  - \* (iii) were previously deported and not rehabilitated by the Director-General as contemplated in regulation 26(4);
  - \* (iv) are a member of or adherent to an association or organisation advocating the practice of racial hatred or social violence;
  - \* (v) are or have been a member of or adherent to an organisation or association utilising crime or terrorism to pursue its ends;
  - \* (vi) are or have been in possession of a fraudulent residence visa, passport or identification document;
- \* (c) you are an illegal foreigner for the following reason(s):  
 .....  
 .....
- Should you have reason to submit that the refusal of your admission into the Republic was procedurally unfair, unreasonable or unlawful, you may, within three days from date of this notice, request the Minister to review this decision.
- However, if the conveyance you arrived on is on the point of departing, your request for review must be lodged immediately and if the said request has not been finalised prior to the departure of the conveyance, you shall depart on such conveyance and await the outcome of the request outside the Republic.

In terms of section 35(10) of the Act, the conveyor responsible for your conveyance to the Republic, namely ....., shall be responsible for the detention and removal of a person conveyed and any costs related to such detention and removal incurred by the Department.

.....  
**Signature of immigration officer**

Official stamp

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....  
 Appointment number:.....  
 Rank/position:.....  
 Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....  
 Rank/position.....  
 Contact No.: Tel: .....

#### ACKNOWLEDGEMENT OF RECEIPT

I acknowledge receipt of the original of this notice and understand the contents thereof.

I \*wish/do not wish to request a review of this decision. My written request \*is attached/will be submitted within three days.

.....  
**Signature of illegal foreigner** **Date**

**\*Delete whichever is not applicable**

#### CERTIFICATE BY INTERPRETER

I,..... (*name(s) and surname*) of  
 ,..... (*\*business/residential address*) and telephone  
 number..... and cell phone number ..... hereby confirm that I have  
 mastered..... (*state language*) and that I have explained to.....  
 (*name(s) and surname of foreigner*) the contents of this notice in the said language and that I am satisfied that  
 the the illegal foreigner fully understands the contents of this document.

.....  
**Signature of interpreter** **Place** **Date**  
**\*Delete which is not applicable**

## FORM 38

**DECLARATION TO MASTER OF SHIP OR PERSON IN CHARGE OF CONVEYANCE  
THAT PERSON CONVEYED IS ILLEGAL FOREIGNER AND NOTICE TO MASTER OF  
SHIP OR PERSON IN CHARGE OF CONVEYANCE REGARDING HIS OR HER  
OBLIGATIONS WHERE PERSON CONVEYED IS REFUSED ADMISSION**

(DHA-96) Form 38



**DEPARTMENT: HOME AFFAIRS  
REPUBLIC OF SOUTH AFRICA**

**DECLARATION TO MASTER OF SHIP OR PERSON IN CHARGE OF CONVEYANCE THAT PERSON  
CONVEYED IS ILLEGAL FOREIGNER AND NOTICE TO MASTER OF SHIP OR PERSON IN CHARGE OF  
CONVEYANCE REGARDING HIS OR HER OBLIGATIONS WHERE PERSON CONVEYED IS REFUSED  
ADMISSION**

**[Section 7(1)(g) read with sections 34(8) and 35(10); Regulations 33(10) and (14)]**

To: \*Master of ship/person in charge of conveyance

..... (name of \*ship/conveyance).

Permission for the following person(s) to enter the Republic was refused on...../...../..... (date) because he/she is an illegal foreigner. The person indicated below shall be detained and removed-

\* (a) in the case of a master of the ship, in terms of section 34(8) and (9) of the Act; or

\* (b) in the case of a person in charge of a conveyance, in terms of section 35(10) of the Act.

Surname	First name(s)	Date of birth	Gender	Nationality	Reason(s) for refusal

Port of entry:..... Date: .....

.....  
**Signature of immigration officer**

**IMMIGRATION OFFICER'S PARTICULARS**

Name and surname:.....

Appointment number:.....

Rank/position:.....

Office:..... Province:.....

**SUPERVISOR'S PARTICULARS**

Name and surname:.....

Rank/position:.....

Contact No.: Tel:.....

**ACKNOWLEDGEMENT OF RECEIPT**

I acknowledge receipt of the original of this notice.

.....  
**Signature of \*master of ship/person in charge of conveyance**

**Date:** .....

**\*Delete which is not applicable**

**FORM 39**  
**LISTS OF PASSENGERS AND CREW, MEDICAL RETURN AND COASTAL ADVICE**

(DHA-128) Form 39



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**LISTS OF PASSENGERS AND CREW, MEDICAL RETURN AND COASTAL ADVICE**  
**[Section 7(1)(g) read with section 35(5)(a), (c) and (d); Regulation 34(9)]**  
**LIST OF PASSENGERS**

The person in charge of a conveyance entering or prior to entering a port of entry of the Republic shall, on demand, deliver to an immigration officer a list of all passengers on board that conveyance, which list shall contain the following information:

Name of conveyance:.....  
 Departing from:.....(place)  
 Arriving at:.....(place)  
 Name and surname of person in charge of conveyance.....  
 \*Flight/Registration No.:.....  
 Date of entry:.....

**Particulars of all passengers on board classified according to their respective destinations (inbound):**

Surname and initials	Passport/Travel document no	Nationality	Embarked at	Destination

I hereby certify that this list contains the particulars of all passengers on board my conveyance.

.....  
**Signature of person in charge of conveyance**

.....  
**Date**

List received by:

Name and surname of immigration officer.....  
 Appointment No:.....  
 Signature:..... Date:.....  
 Place:.....

**LIST OF CREW AND PERSONS CARRIED OTHER THAN PASSENGERS AND STOWAWAYS**

The person in charge of a conveyance which enters any port must, on demand, deliver to the immigration officer a list of all the crew and all persons (other than passengers and stowaways) employed, carried or present on that conveyance.

Name of conveyance:.....  
 Port of entry (at country of departure):.....  
 Name(s) and surname of person in charge of conveyance.....  
 Date on which conveyance entered the Republic:.....  
 Port of entry:.....  
 Date of final departure from Republic:.....

Next port of call:.....

**Crew list:**

No	Rank	Surname and initial(s)	Nationality	Date of birth	Passport No.	Expiry date of passport

**List of other persons carried (other than passengers and stowaways):**

No	Rank	Surname and initial(s)	Nationality	Date of birth	Passport No.	Expiry date of passport

I certify that this list contains the names of all crew and persons other than passengers and stowaways on board the conveyance.

.....  
**Person in charge of conveyance** **Date**

**List received by:**

Name and surname of immigration officer.....

Appointment No:.....

Signature:..... Date:.....

**MEDICAL RETURN**

Name of conveyance:.....

Port of entry:.....

**Crew, passengers and all other persons on board conveyance who, during the voyage, have suffered or are suspected of suffering from a disease, whether infectious or otherwise:**

Surname and initial(s)	Rank/Class	Nature of illness	Remarks

**Details of any birth or death that occurred on board the conveyance between the present and previous port:**

Name (mention father and mother's name in case of birth)	Rank/Class	birth/Death	Date	Remarks

Certified by me ..... (name and surname of medical officer/person in charge of the conveyance) at ..... (port of entry) on the .....day of .....20.....

.....  
**Signature of \*medical officer/person in charge of conveyance**

**\*Delete which is not applicable**

**COASTAL ADVICE**

**(To be completed by immigration officer for conveyance destined for more than one port in the Republic)**

**TO: Immigration officer** at ..... (next port of call in the Republic)

Name of conveyance: .....

Ship's File No:.....

Number of illegal foreigners ..... and reasons for their illegality:

.....  
 .....

*Note: (Attach notice issued to the person in charge of ship, dependant on the reason of illegality).*

Number of passengers in transit:.....

Number of persons for final disembarkation: .....

Number of foreign crew:.....

Number of crew members who are citizens or permanent residence holders:.....

Number of persons whose final departure must be certified:.....

Number of stowaways remaining on board declared by the master of the ship at last port of call:

.....

Remarks:

.....

.....

.....

Dispatched from..... (port of entry)

.....  
**Signature of immigration officer**

.....  
**Appointment number**

.....  
**Date**



# **FORM 40** **LIST OF STOWAWAYS**

(DHA-1567) Form 40



## **DEPARTMENT OF HOME AFFAIRS** **REPUBLIC OF SOUTH AFRICA** **LIST OF STOWAWAYS**

**[Section 7(1)(g) read with section 35(5)(b); Regulation 33(10)]**

The person in charge of a conveyance entering a port of entry in the Republic shall, on demand, deliver to the immigration officer a list of stowaways.

### **PART A** **STOWAWAYS**

#### Details of Conveyance

Name of conveyance:.....

Registration No:.....

Name(s) and surname of person in charge of conveyance:.....

Port of entry:.....

Date of entry:.....

#### PERSONAL PARTICULARS OF STOWAWAYS

Surname	First name(s)	Passport/Travel document No	Type of travel document	Nationality

### **PART B**

#### **DETAILS OF STOWAWAY**

**(To be completed in respect of each stowaway)**

#### PERSONAL PARTICULARS OF STOWAWAYS

Names(s):.....

Surname:.....

Date of birth:..... Place of birth:.....

*Photograph of stowaway*

Nationality:.....

Country of origin:.....

First language:.....

Other spoken languages:.....

Passport/travel document No:.....

Date of issue:.....

Place of issue:.....

Date of expiry:.....

Issuing authority:.....

Home address/Address in country of boarding:.....

Employer's name:.....

Employer's address:.....

Height:..... Weight:..... Marital status:.....

Name(s) and surname of spouse:.....

Nationality of spouse:..... Address of spouse:.....

Names and surname of parents:.....

Nationality of parents:.....

Address of parents:.....

#### STOWAWAY DETAILS

Date found:...../...../..... Time Found:.....

Place of boarding:..... country of boarding:.....

Time spent in country of boarding:..... Intended port of destination:.....  
 Intended final destination (if different).....  
 Stated reasons for boarding the ship:.....  
 .....

#### OTHER DETAILS

Method of boarding, including other persons involved (e.g. crew, port workers etc.), and whether they were secreted in cargo/container or hidden in the vessel:

.....  
 .....

Inventory of stowaway's possessions:

.....  
 .....

Was the stowaway assisted in boarding the vessel, or assisted by any member of the crew? If so, was any payment made for the assistance?.....

.....

Statement made by the stowaway (*attach additional page, if space is not enough*):

.....  
 .....

Statement made by the person in charge of the conveyance (Master), including any observations on the credibility of the information provided by the stowaway:

.....  
 .....

I hereby certify that this list contains the particulars of all stowaways found on board my conveyance.

Date of interview of the stowaway:..... Place: .....

.....  
**Signature of stowaway**

.....  
**Place**

.....  
**Date**

.....  
**Person in charge of conveyance**

.....  
**Place**

.....  
**Date**

#### ACKNOWLEDGEMENT OF RECEIPT

I,..... (*name of immigration officer*) hereby confirm receipt of the list of stowaways in terms of section 35(5)(b) of the Act.

.....  
**Signature of immigration officer**

.....  
**Place**

.....  
**Date**

**FORM 41**  
**APPLICATION BY MASTER OR OWNER OF SHIP OR AGENT REPRESENTING**  
**MASTER OR OWNER OF SHIP FOR CERTIFICATE TO LEAVE HARBOUR**

(DHA-86) Form 41



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**

**APPLICATION BY MASTER OR OWNER OF SHIP OR AGENT REPRESENTING MASTER OR OWNER**  
**OF SHIP FOR CERTIFICATE TO LEAVE HARBOUR**  
**[Section 7(1)(g) read with section 35(8); Regulation 34(12)]**

I, ..... (name(s) and surname of \*master or owner of the ship/agent representing master or owner of the ship) hereby apply for a certificate to leave the harbour and declare that the following is a complete return of changes in the crew, passengers and others since arrival at this port:

**CREW**

Crew signed off	Rank	Crew Visa No.	Passport No
Crew signed on	Rank	Crew Visa No.	Passport No
Deserters left behind	Rank	Crew Visa No.	Passport No

Crew left behind in hospital	Rank	Crew Visa No.	Passport No	Name of hospital
Crew in custody in the Republic	Rank	Crew Visa No.	Passport No	Name of custody

**Distressed seamen shipped**

Surname and Initial(s)	Rank	Passport No

**Passengers in transit:**

Surname and initial(s)	Passport No.	Nationality	Destination

**List of stowaways on board:**

Surname and initial(s)	Passport No.	Nationality	Place of return (Destination)

.....  
**Signature of person in charge of conveyance**

.....  
**Date**

.....  
**Place**

Name of conveyance:.....

Registration No.....

Flag:.....

**Name and surname of immigration officer**.....

**Appointment No:**.....

**Signature:**..... **Date:**.....

**Place**.....

**FORM 42**  
**CERTIFICATE OF COMPLIANCE TO OBTAIN CLEARANCE FROM CUSTOMS**

(DHA-92) Form 42



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**CERTIFICATE OF COMPLIANCE TO OBTAIN CLEARANCE FROM CUSTOMS**  
**[Section 7(1)(g) read with section 35(8); Regulation 34(13)]**

To: **Officer in charge of Customs and Excise**

Port of entry:.....

I hereby certify that the person in charge of..... (*make and registration number of conveyance*) complied with the provisions of the Act on..... (*date*).

**Immigration officer's name:**.....

.....  
**Signature**

.....  
**Appointment No**

.....  
**Place**

.....  
**Date**

**FORM 43**  
**NOTICE OF ADMINISTRATIVE FINE INCURRED FOR INCORRECT CERTIFICATION**

[Form 43 substituted by GN R1328 of 29 November 2018 (wef 1 December 2018).]

(DHA-1747) Form 43



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**[Section 7(1)(g) read with section 50(2); Regulation 39(2)]**

To: ..... (name and surname of chartered accountant, professional accountant or business accountant).

You are hereby informed that in terms of section 50(2) of the Immigration Act 13 of 2002, you have incurred a fine to the amount of R7 000.00 for negligently producing an incorrect certification in respect of.....

You are hereby required to pay the fine within seven days of the date of this notice. Should you fail to pay the said amount within the said period, you shall be liable to prosecution in terms of the provisions of section 49(16) of the Act.

.....  
**For Director-General**

.....  
**Date**

.....  
**Place:**

**FORM 44**  
**NOTICE OF ADMINISTRATIVE FINE INCURRED BY OWNER OR PERSON IN**  
**CHARGE OF CONVEYANCE**

(DHA-1751) Form 44



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**NOTICE OF ADMINISTRATIVE FINE INCURRED BY OWNER OR PERSON IN CHARGE OF**  
**CONVEYANCE**  
**[Section 7(1)(g) read with section 50(3); Regulation 39(4)]**

To:..... (owner or person in charge of conveyance)

\*Identity Document/Passport number of owner or person in charge of conveyance:

**Person in charge of conveyance**

Name and surname:.....

Passport No..... Identity No:.....

Residential and postal address of person in charge of conveyance:

In the Republic (*postal*): In the Republic (*residential*):

.....

.....

Abroad (*postal*): Abroad (*residential*):

.....

.....

**Owner/Employer's Details**

Name and surname:.....

Name of Company:.....

Registration No. of conveyance:.....

Residential and postal address of employer (*in the Republic and abroad*):In the Republic (*postal*): In the Republic (*residential*):

.....

.....

Abroad (*postal*): Abroad (*residential*):

.....

.....

You are hereby informed that in terms of section 50(3) of the Act you have incurred a fine to the amount of R..... for contravening section 35(9) of the Act, for conveying passengers listed below on conveyance number.....on...../...../.....

You are hereby required to pay the fine within 30 days of the date of this notice. Should you fail to pay the said amount you shall be liable to prosecution.

.....  
Signature of immigration officer.....  
Date.....  
Place:**ACKNOWLEDGEMENT OF RECEIPT**

I acknowledge receipt of the original of this notice.

.....  
Signature of \*owner/person in charge of conveyance.....  
Date

	<i>LEFT THUMBPRINT</i> <div data-bbox="1010 219 1401 304" style="border: 1px solid black; height: 38px;"></div>
<p>.....</p> <p><b>Signature of witness</b></p> <p>*Delete whichever is not applicable</p>	<p>.....</p> <p><b>Date</b></p>



**FORM 45**  
**NOTICE OF ADMINISTRATIVE FINE INCURRED BY OWNER OR PERSON IN**  
**CHARGE OF CONVEYANCE**

(DHA-1775) Form 45



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**

**NOTICE OF ADMINISTRATIVE FINE INCURRED BY OWNER OR PERSON IN CHARGE OF CONVEYANCE**  
**[Section 7(1)(g) read with section 50(4); Regulation 39(5)]**

To:..... (*owner or person in charge of conveyance*)

You are hereby informed that in terms of section 50(4) of the Act you have incurred a fine to the amount of R..... for contravening section 35(2) of the Act, for failure to-\*

- (a) Electronically transmit the information contemplated in Regulation 33(2) in respect of passengers and/or crew listed below on conveyance number.....on...../...../.....within the prescribed period; or
- (b) Adhere to the boarding advice issued by the Director-General in terms of section 35(2)(c); or
- (c) Transmit accurate information.

You are hereby required to pay the fine within 30 days of the date of this notice. Failure to pay the said amount will render you liable to prosecution.

.....  
**Signature of Authorised official**

.....  
**Date**

.....  
**Place:**

**\*Delete whichever is not applicable**

**This fine is issued in respect of the following persons/information**

.....  
 .....

.....  
 .....

**ACKNOWLEDGEMENT OF RECEIPT**

**(To be returned to the Department within a period of three days)**

I acknowledge receipt of the original of this notice.

.....  
**Signature of \*owner/person in charge of conveyance**

.....  
**Date**

**\*Delete whichever is not applicable**

**FORM 46**  
**APPLICATION FOR THE ISSUE OF PROOF OF PERMANENT RESIDENCE OR**  
**EXEMPTION STATUS**

(DHA-) Form 46



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**APPLICATION FOR THE ISSUE OF PROOF OF PERMANENT RESIDENCE OR EXEMPTION STATUS**  
**[Regulation 25]**

**1 PARTICULARS OF APPLICANT**

- (a) Surname.....
- (b) Christian names/Forenames.....
- (c) Date of birth.....
- (d) Maiden surname and all other surnames by which previously known.....
- (e) Number and date of permit for residence (immigration permit) or, if not available, year in which you applied for permanent residence.....
- (f) Any reference number (Home Affairs/Immigration).....
- (g) Date of first arrival in South Africa.....
- (h) Identity number .....
- (i) Passport number .....
- (j) Nationality at birth .....
- (k) Present nationality .....
- (l) Postal address .....
- (m) Telephone No : 1. Work ..... 2. Home.....
- Cellphone No..... E-mail address .....

**2 IMPORTANT: PARTICULARS OF APPLICANT'S FAMILY MUST BE FURNISHED. IF MARRIED TO SOUTH AFRICAN CITIZEN, PROOF TO BE PROVIDED E.G. COPY OF MARRIAGE CERTIFICATE/ID**

	Surname and forename(s)	Date of birth	Immigration permit number, if available	Nationality
<b>Wife/husband</b>	.....	.....	.....	.....
<b>Parents (of applicant):</b>	.....	.....	.....	.....
<b>(i) Father</b>	.....	.....	.....	.....
<b>(ii) Mother:</b>	.....	.....	.....	.....

**3 DETAILS OF PREVIOUS COUNTRIES OF RESIDENCE AND EMPLOYERS. IF THE EMPLOYER WAS: (A) AFFILIATED TO AS SOUTH AFRICAN COMPANY (B) AN INTERNATIONAL ORGANIZATION OF WHICH THE STATE IS A MEMBER (C) OR IF YOU WERE SECONDED BY THE SOUTH AFRICAN GOVERNMENT, PLEASE PROVIDE PROOF.**

From - To	City/Town	Country	Employer

<p>I declare that the information furnished on this form is correct.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;"> <p>.....</p> <p style="text-align: center;"><b>Signature of applicant</b></p> </div> <div style="width: 35%;"> <p>.....</p> <p style="text-align: center;"><b>Date:</b></p> </div> </div> <p><b>NOTE: The completed form must be signed before an official of the Department of Home Affairs, a Local Magistrate's office or the SA Police. It will be necessary for you to identify yourself to the interviewing officer by means of your passport or Identity document.</b></p> <p><b>A separate form must be completed in respect of each person requiring proof of permanent residence. Copies of permits for Permanent Residence are NOT issued.</b></p> <p><b>* If this form is completed the Department's records will be consulted with a view to furnishing a certificate confirming that permanent residence has been granted. A FEE IS PAYABLE.</b></p>			
<p><b>4 FOR OFFICIAL USE ONLY</b></p>			
<p>The applicant was identified from Passport/Identity Document number.....</p> <p>Signed before me at.....on..... 20.....</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;"> <p>.....</p> <p style="text-align: center;"><b>Full names and surname</b></p> <p>.....</p> <p style="text-align: center;"><b>Signature and designation</b></p> </div> <div style="width: 35%; border: 1px solid black; padding: 10px; text-align: center;"> <p><b>OFFICIAL DATE STAMP</b></p> </div> </div>			

## FORM 47 APPLICATION FOR EXEMPTION

(DHA-) Form 47



### DEPARTMENT OF HOME AFFAIRS REPUBLIC OF SOUTH AFRICA APPLICATION FOR EXEMPTION [Section 31(2)(b) and regulation 28]

REFERENCE NUMBER.....

**PERSONAL DETAILS OF APPLICANT**

1.1 Title: \_\_\_\_\_ 1.2 Surname: \_\_\_\_\_  
 1.3 First name(s): \_\_\_\_\_  
 1.4 Maiden name (if applicable): \_\_\_\_\_  
 1.5 Other former surnames: \_\_\_\_\_  
 1.6 Date of birth: \_\_\_\_\_ 1.7 Country of birth: \_\_\_\_\_  
 1.8 Nationality at birth \_\_\_\_\_ 1.9 Present nationality: \_\_\_\_\_  
 1.10 Passport no: \_\_\_\_\_ Expiry date: \_\_\_\_\_ Issued by (Country): \_\_\_\_\_  
 1.11 Marital status: \_\_\_\_\_ Date: \_\_\_\_\_  
 1.12 Present residential address: \_\_\_\_\_  
 1.13 Postal address: \_\_\_\_\_  
 1.14 Tel. No: Home: \_\_\_\_\_ Work: \_\_\_\_\_  
 Cell: \_\_\_\_\_ E-mail address: \_\_\_\_\_  
 1.15 Occupation: \_\_\_\_\_  
 1.16 Type of temporary permit held (if applicable): \_\_\_\_\_  
 1.17 Valid until: \_\_\_\_\_ Issuing office: \_\_\_\_\_  
 1.18 Date and place where you entered the RSA: \_\_\_\_\_

**2 DETAILS OF APPLICANTS SPOUSE (If applicable):**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_  
 Maiden name: \_\_\_\_\_ First names: \_\_\_\_\_  
 Place of birth: \_\_\_\_\_ Country: \_\_\_\_\_  
 Nationality at birth: \_\_\_\_\_  
 Date of birth: \_\_\_\_\_ Passport Number: \_\_\_\_\_

**3 DETAILS OF CHILDREN ACCOMPANYING YOU:**

Surname	First names	Date of birth	Relation-ship	Country and place of birth	Present nationality	Occupation

**4 EMPLOYMENT RECORD OF APPLICANT (to cover full period of employment):**

Name of employer	Address: Town/City	From	To	Nature of work

--	--	--	--	--

**5 DETAILS REGARDING APPLICANT AND (if applicable) SPOUSE AND CHILDREN:**

- Have you or any of your dependants accompanying you ever been convicted of any crime? \_\_\_\_\_
- Is a criminal or civil case pending against you or any of your dependants accompanying you? \_\_\_\_\_
- Are you or any of your dependants suffering from tuberculosis or any other infectious or contagious disease or any mental or physical deficiency? \_\_\_\_\_
- Are you a member of, or adherent to an association or organisation advocating the practice of social violence, or racial hatred? \_\_\_\_\_

If you replied to any of the questions above in the affirmative, please furnish full details.

**6 REASONS FOR EXEMPTION REQUEST**


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**NOTE: Any incorrect or misleading information or false documents furnished in support of this application may result in the application being rejected or if discovered after the issuing of the waiver the applicant shall not be allowed to sojourn in the Republic.**

I/We the undersigned, declare that the details reflected in this application and supporting documents are true and correct and that it is my/our intention to reside/work in the Republic. I undertake to inform the Department of any change of address whilst the application is being processed, with the understanding that in the event of failure to do so the Department will not be responsible for any breakdown in communication. I/we, furthermore, undertake to inform the Department of any change in relevant information or circumstances that could influence the outcome of this application.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICIAL USE;**

Application checked and all supporting documents verified.

Application tracked and traced.

.....  
**Signature of official accepting the application**  
**(Department of Home Affairs)**

Official stamp

**Surname and full forename(s):** \_\_\_\_\_

**Persal No:** \_\_\_\_\_ **Designation:** \_\_\_\_\_

**PLEASE READ THE FOLLOWING**

In providing for the regulation of admission of foreigners to and their residence in the Republic, the Immigration Act, 2002 (Act 13 of 2002), *inter alia*, aims to promote economic growth through the employment of needed foreign labour which does not adversely impact on existing labour standards and rights and expectations of South African workers.

In terms of section 31(2)(b) of the Immigration Act, 2002 (Act 13 of 2002), upon application, the Minister may under terms and conditions determined by him or her grant a foreigner or a category of foreigners the rights of permanent residence for a specified or unspecified period when special circumstances exist which would justify such a decision.

In order to satisfy the Minister that the issuing of an exemption to a foreigner would promote economic growth and would not be to the disadvantage of South African citizens or permanent residents, the following documents have to accompany this application:

- A letter signed by the applicant citing reasons for the exemption and a comprehensive motivation for each reason provided.
- A copy of the applicant's *curriculum vitae*.
- A copy of the applicant's passport and all temporary residence permits affixed therein.
- A copy of the employment contract signed by both the employer and the employee, if applicable.
- Background on the company/institution for record purposes.
- Any other information that would assist the Minister to make an informed decision when considering an exemption.

**FORM 48**  
**APPLICATION FOR WAIVER OF PRESCRIBED REQUIREMENTS**

(DHA-) Form 48



**DEPARTMENT OF OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**APPLICATION FOR WAIVER OF PRESCRIBED REQUIREMENTS**  
**[Section 31(2)(c) and regulation 29]**

**REFERENCE NUMBER** .....**PERSONAL DETAILS OF APPLICANT**

1.1 Title: \_\_\_\_\_ 1.2 Surname: \_\_\_\_\_  
 1.3 First names: \_\_\_\_\_  
 1.4 Maiden name (if applicable): \_\_\_\_\_  
 1.5 Other former surnames: \_\_\_\_\_  
 1.6 Date of birth: \_\_\_\_\_ 1.7 Country of birth: \_\_\_\_\_  
 1.8 Nationality at birth \_\_\_\_\_  
 1.9 Present nationality: \_\_\_\_\_  
 1.10 Passport no: \_\_\_\_\_ Expiry date: \_\_\_\_\_ Issued by (Country): \_\_\_\_\_  
 1.11 Marital status: \_\_\_\_\_ Date: \_\_\_\_\_  
 1.12 Present residential address: \_\_\_\_\_  
 1.13 Postal address: \_\_\_\_\_  
 1.14 Tel. No.: Home: \_\_\_\_\_ Work: \_\_\_\_\_  
 Cell: \_\_\_\_\_ E-mail address: \_\_\_\_\_  
 1.15 Occupation: \_\_\_\_\_  
 1.16 Type of temporary permit held (if applicable): \_\_\_\_\_  
 1.17 Valid until: \_\_\_\_\_ Issuing office: \_\_\_\_\_  
 1.18 Date and place where you entered the RSA: \_\_\_\_\_

**2 DETAILS OF APPLICANTS SPOUSE (If applicable):**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_  
 Maiden name: \_\_\_\_\_  
 First names: \_\_\_\_\_  
 Place of birth: \_\_\_\_\_ Country: \_\_\_\_\_  
 Nationality at birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
 Passport number: \_\_\_\_\_

**3 DETAILS OF CHILDREN ACCOMPANYING YOU:**

Surname	First names	Date of birth	Relation-ship	country and place of birth	Present nationality	Occupation

**4 EMPLOYMENT RECORD OF APPLICANT (to cover full period of employment):**

Name of employer	Address: Town/City	From	To	Nature of work


**5 DETAILS REGARDING APPLICANT AND (if applicable) SPOUSE AND CHILDREN:**

- Have you or any of your dependants accompanying you ever been convicted of any crime? \_\_\_\_\_
- Is a criminal or civil case pending against you or any of your dependant[s] accompanying you? \_\_\_\_\_
- Are you or any of your dependants suffering from tuberculosis or any other infectious or contagious disease or any mental or physical deficiency? \_\_\_\_\_
- Are you a member of, or adherent to an association or organisation advocating the practice of social violence, or racial hatred? \_\_\_\_\_

If you replied to any of the questions above in the affirmative, please furnish full details.

**6 SECTIONS OF THE REGULATION THAT MUST BE WAIVED**


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**NOTE: Any incorrect or misleading information or false documents furnished in support of this application may result in the application being rejected or if discovered after the issuing of the waiver the applicant shall not be allowed to sojourn in the Republic.**

I/We the undersigned, declare that the details reflected in this application and supporting documents are true and correct and that it is my/our intention to reside/work in the Republic. I undertake to inform the Department of any change of address whilst the application is being processed, with the understanding that in the event of failure to do so the Department will not be responsible for any breakdown in communication. I/we, furthermore, undertake to inform the Department of any change in relevant information or circumstances that could influence the outcome of this application.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICIAL USE;**

Application checked and all supporting documents verified.  
Application tracked and traced.

.....  
**Signature of official accepting the application**  
**(Department of Home Affairs)**

*Official stamp*

**Name and surname:** \_\_\_\_\_  
**Designation:** \_\_\_\_\_ **Persal No:** \_\_\_\_\_

**PLEASE READ THE FOLLOWING**

In providing for the regulation of admission of foreigners to and their residence in the Republic, the Immigration Act, 2002 (Act 13 of 2002), *inter alia*, aims to promote economic growth through the employment of needed foreign labour which does not adversely impact on existing labour standards and rights and expectations of South African workers.

**Temporary residence permits**

In order to satisfy the Director-General that the issuing of a work permit to a foreigner would promote economic growth and would not be to the disadvantage of South African citizens or permanent residents, documentary proof must be submitted that a diligent search had been done and that the employer had been unable to employ a local candidate with qualifications or skills and experience equivalent to those of the applicant. This requirement is satisfied by means of an advertisement in the national printed media, which would afford South African citizens and permanent residents the opportunity to compete for the position. In terms of section 31(2)(c) of the Act, the Minister may, for good cause, waive any prescribed requirement or form. Should a foreigner thus not be able to comply with the above requirements, he/she or the employer may request the Minister to exempt the applicant from submitting the relevant document(s). The following documents have to accompany this application:

- (a) A letter signed by the employer, citing the requirements to be waived and a comprehensive

- (b) motivation for each requirement.
- (b) A copy of the applicant's *curriculum vitae*.
- (c) A copy of the applicant's passport and all temporary residence permits affixed therein.
- (d) A copy of the employment contract signed by both the employer and the employee.
- (e) Background on the company/institution for record purposes.

Should the request be considered favourably, a letter will be forwarded to the applicant or his/her employer, which has to be submitted with the application and remaining requirements at the nearest Regional Office of the Department or South African foreign office if the applicant is still abroad.

#### **Permanent residence permits**

In terms of section 31(2)(c) read with section 27 of the Immigration Act, 2002 (Act 13 of 2002), and the permanent residence application form BI-947, the Minister may, for good cause, waive any prescribed requirement or form. Should a foreigner thus not be able to comply with any of the requirements, he/she may request the Minister to exempt the applicant from submitting the relevant document(s). The following documents have to accompany this application:

- (a) A letter signed by the applicant, citing the requirements to be waived and a comprehensive motivation for each requirement.
- (b) A copy of the applicant's *curriculum vitae*.
- (c) A copy of the applicant's passport and all temporary residence permits affixed therein.
- (d) A copy of the employment contract signed by both the employer and the employee; if applicable.
- (e) Background on the company/institution for record purposes.
- (f) Business Plan, Bank or financial statements, if applicable.
- (g) Recommendation from the Department of Trade and Industry, if the application is made in respect of a business being conducted in the Republic.



**FORM 49**  
**NOTICE OF APPEAL**

(DHA-) Form 49



**DEPARTMENT OF HOME AFFAIRS**  
**REPUBLIC OF SOUTH AFRICA**  
**NOTICE OF APPEAL**  
[Section 8(4) and (6); read with regulation 7(3)]  
**REFERENCE NUMBER:** \_\_\_\_\_

**To: The DIRECTOR-GENERAL**

I hereby wish to apply for review or appeal in terms of section 8(4) or 8(6) of the Immigration Act, 2002 (Act 13 of 2002) as amended.

**FOR OFFICIAL USE**

- 1 Office of application \_\_\_\_\_
- 2 Date of Appeal application \_\_\_\_\_

**IMPORTANT: PLEASE READ CAREFULLY**

- 1 To be completed in detail in English. Please print in black ink.
- 2 The completed form must be accompanied by the relevant documents, in support of your appeal.
- 3 Applicant(s) advised to keep copies of all documentation submitted for appeal.
- 4 Attach copy of the rejection letter.

**PERSONAL DETAILS OF APPLICANT**

Surname: \_\_\_\_\_

Forename(s): \_\_\_\_\_

Date of birth: \_\_\_\_\_ Country of birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Passport number: \_\_\_\_\_

Present residential address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact details: \_\_\_\_\_

Tel: \_\_\_\_\_ Cell number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Date when you received the rejection letter: \_\_\_\_\_

Reason(s) for appeal: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_  
SIGNATURE OF OFFICIAL ACCEPTING THE APPLICATION \_\_\_\_\_  
NAME AND SURNAME \_\_\_\_\_  
DESIGNATION: \_\_\_\_\_

*Official stamp*

# **FORM 50** **CHANGE OF ADDRESS**



REPUBLIC OF SOUTH AFRICA  
DEPARTMENT OF HOME AFFAIRS  
CHANGE OF ADDRESS  
Immigration Act, 2002 (Act 13 of 2002)  
[Regulation 40]

(DHA-) Form 50

Bar Code

**Important** - Please read this information carefully before you complete this form. If you intend to change your residential address or contact details for more than 14 days while your application is being processed or after being granted a visa or permit, you must inform the Department of Home Affairs of your new residential address or contact details prior to moving, and how long you will be staying at the new address. **PLEASE ATTACH A COPY OF YOUR PASSPORT AS WELL AS A COPY OF YOUR VISA OR PERMIT ISSUED IN TERMS OF THE IMMIGRATION ACT, 2002.**

**A APPLICANTS DETAILS**

Passport number	<input type="text"/>	Visa/Permit No.	<input type="text"/>
Surname	<input type="text"/>		
Forenames (in full)	<input type="text"/>		
Place of birth	<input type="text"/>		
Country of birth	<input type="text"/>		
Residential address	<input type="text"/>		
Street 1	<input type="text"/>		
Street 2	<input type="text"/>		
Town/Village	<input type="text"/>		
Province	<input type="text"/>	Code	<input type="text"/>
Telephone no., incl. area code	<input type="text"/>	Cell phone no.	<input type="text"/>
E-mail	<input type="text"/>		

**B NEW ADDRESS**

Residential address	<input type="text"/>		
Street	<input type="text"/>		
Street 2	<input type="text"/>		
Town/Village	<input type="text"/>		
Province	<input type="text"/>	Code	<input type="text"/>
Period of intended [stay	<input type="text"/>		

**C NEW CONTACT DETAILS:**

Telephone no., incl. area code	<input type="text"/>	Cell phone no.	<input type="text"/>
E-mail address	<input type="text"/>		

**D DECLARATION/OATH/AFFIRMATION**

I, \_\_\_\_\_ (the informant), hereby declare under oath/affirm that the information submitted in this Affidavit is true and correct, and I understand that a false statement is punishable under section 49(16) of the Immigration Act 13 of 2002.

Signature

**APPLICATION RECEIVED AND CAPTURED BY:**

[illegible][illegible]

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## 1 Accommodation

- ## 2 Nutrition

- ### 3 Hygiene

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