

Discretionary Resident Permit

Financial Circumstances – Investments

Applicant First name(s)			
Applicant Surname:			
Applicant's date of birt	h:		
Application number:			
	sections below. If any s	ections are not applicable	e, please state 'N/A'.
Section 1: Investments	dividands interast)		
Investment Income (e.g. Nature of Income and	· · · ·		
the asset from which	Paid gross or net	Last Financial Year	Current Financial Year
it is derived	(delete which is not applicable)		
	Gross / Net		
Section 1a: Supporting	Documentation (If applic	able)	
Туре			Tick
•		estment income listed abo	ove,
including if applicable di	vidend statements		

Section 2: Declaration

I declare that all of the information submitted in respect of this form is correct to the best of my knowledge and belief; and

I understand that it is an offence under the Population Management (Guernsey) Law, 2016 (the "Law") for any person who in connection with an application for a Certificate or Permit knowingly makes any false statement or recklessly makes any statement which is false in a material particular and/or knowingly fails to produce or furnish any information to the Population Management Office which is required under the provisions of the Law or any Ordinance made there under.

Date:	
Full Name:	
Signature:	