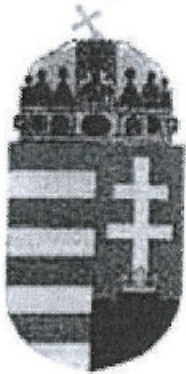


— SAMPLE —


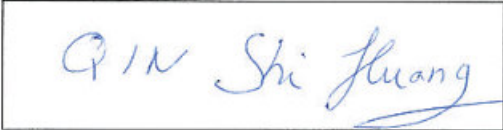
Schedule 33 to Decree No. 25/2007 (31 May) IRM of the Ministry of Justice and Law Enforcement



## BEVÁNDORLÁSI ÉS ÁLLAMPOLGÁRSÁGI HIVATAL

### Application for Temporary Residence Permit

Please stick  
1 PHOTO here,  
and bring  
one extra  
with you

Authority receiving the application:	Mechanical file number: □□□□□□□□
Body entering application data:	
<input type="checkbox"/> Issue of residence permit on the first occasion	
place of entry: <u>BUDAPEST</u>	
date of entry: <u>15</u> <u>AUG</u> <u>2016</u> (day) (month) (year)	
Number and validity of residence visa:	
H □□□□□□□□ (day) (month) (year)	
	
	[Specimen signature of applicant] The entire signature must be within the frame
Place of receipt of document:	
<input type="checkbox"/> The applicant will receive the document at the issuing authority.	
<input type="checkbox"/> The applicant requests sending of the document by mail:	

The first city  
you land  
in the  
Schengen zone

1. Applicant's personal data			
Surname (as in the passport): <u>QIN</u>		Given name(s) (as in the passport): <u>SHI HUANG</u>	
Birth surname: _____		Birth given name(s): _____	
Mother's birth surname and given name: <u>ZHAO JI</u>	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Widowed	<input checked="" type="checkbox"/> Married <input type="checkbox"/> Divorced

— SAMPLE —

- SAMPLE -

Qin Shi Huang  
was Chinese, but if  
you have TAIWANESE  
passport,  
please write  
TAIWAN

Date of birth: 7 (day) FEB (month) 260 BC (year)		Place of birth (city/town/village): ZHAO	Country: CHINA
Citizenship: CHINESE		Nationality (not mandatory):	
Last permanent residence outside Hungary: XIANYANG, EMPEROR ROAD 1.			
Qualification:	Education: <input type="checkbox"/> primary <input type="checkbox"/> secondary <input checked="" type="checkbox"/> higher		Occupation prior to arrival at Hungary: EMPEROR

<b>2. Applicant's passport data</b>	
Passport number: 324512031A	Date and place of issue: 20 (day) 01 (month) 201 <sup>BC</sup> (year)
Type of passport: <input type="checkbox"/> private passport <input type="checkbox"/> service <input type="checkbox"/> diplomatic <input type="checkbox"/> other	Date of validity: 19 (day) 01 (month) 101 <sup>BC</sup> (year)

<b>3. Planned period and reasons for residence</b>	
For what period of time and reasons do you apply for the permission of residence? WORKING HOLIDAY	15 day AUG month 2016 year - 15. AUG. 2017.

<b>4. Data of applicant's accommodation in Hungary</b>					
Zip number: 1039		City/town/village: BUDAPEST		Name of public area: CSA'ZAR	
Type of public area: STREET	House number: 12.	Building (staircase, floor, door):	Type of public area:	House number: 31A	Building (staircase, floor, door):
Legal ground of residence at the accommodation: <input type="checkbox"/> owner <input checked="" type="checkbox"/> tenant <input type="checkbox"/> family member <input type="checkbox"/> courtesy tenant <input type="checkbox"/> other, specify: RENT					

<b>5. Data relating to living in Hungary:</b>	
Available savings: 1000.000 USD	Other supplementary income/property securing living: OWNER OF PALACE

<b>6. Conditions of return or further travel</b>					
What country will you travel back or to upon the expiry of your lawful residence? TAIWAN			By what means of transport? AIR PLANE		
Do you have the necessary	passport? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	visa? <input type="checkbox"/> yes <input type="checkbox"/> no	ticket? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	financial cover? <input checked="" type="checkbox"/> yes, sum: 1000.000 USD	<input type="checkbox"/> no


- SAMPLE<sup>2</sup> -

- SAMPLE -

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7. Other data
Do you have full health insurance for the period of your residence in Hungary? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no
Have you already participated in the programme of tourists employed on a temporary basis in Hungary? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no
Has your previous application for residence been rejected? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no
Are you included in the criminal records? If yes, in what country, when, for what criminal act and what punishment was imposed? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no
Have you already been expelled from Hungary, if yes, when? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no ____ (day) ____ (month) ____ (year)
To your knowledge do you suffer from the following infectious diseases in need of treatment: HIV/AIDS, as well as tuberculosis, hepatitis B, lues, leprosy, typhoid, or do you carry the pathogens of the following diseases in your organization: HIV, hepatitis B and typhoid? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no
In case you suffer from the following diseases, or are in pathogenic or pathogen-carrying status, do you receive mandatory and regular medical treatment? <input type="checkbox"/> yes <input type="checkbox"/> no
Permanent or regular place of residence prior to your arrival at Hungary: Country: <u>CHINA</u> City/town/village: <u>XIANGYANG</u> Name of public area: <u>EMPEROR Rd 1.</u>
What country will you travel to if your entitlement to residence terminates? Country: <u>TAIWAN</u>

I hereby declare that the above data are true. I acknowledge that the disclosure of untrue data shall result in the rejection of the application.

Dated: 2016. 07. 01

Qin Shi Huang signature

Place of duty stamp:
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- SAMPLE -

To be filled in by the authority:

In case the application is approved

I permit the applicant's residence in Hungary for the purpose of .....

until  day  month  year

Dated: ..... (signature, seal)

Number of residence permit issued:

I have received the residence permit.

Dated: ..... (applicant's signature)

Number of residence permit withdrawn:

In case the application is refused

Number of decision on refusal: .....

Date of refusal:  day  month  year

Reason for refusal (in short):

## INFORMATION

The application for residence permit may be submitted in person no later than 30 days prior to the expiry of the eligibility of residence to the regional directorate competent at the place of accommodation, and the documents shall be simultaneously attached. One photo shall be attached to the application. The valid travel document must be presented upon the submission of the application. The validity of the travel document may not be less than one year from the thirtieth day following the submission of the application.

Enclosures to be attached to the application:

- Document certifying the purpose of residence.
- = Declaration on residence in Hungary in accordance with an entry aim defined in a separate international agreement.
- = Other document.
- = Copy of valid travel document.
- Document certifying the legal ground of housing in case the certification of the right to housing is prescribed in the relevant international agreement.
- = Document certifying existence of reserved and paid accommodation.
- = Contract of tenancy or document of courtesy tenancy.
- = Authentic copy of the title deed in case of own real property.
- = Hostel certificate.
- = Other document.
- Document certifying the legal ground of living in case the provision of living is prescribed in the relevant international agreement.
- = Bank certificate.
- = Certificate of income disbursed from outside Hungary.
- = Hungarian currency or foreign currency that can be converted at a Hungarian financial institution.
- = Other document.
- In case the relevant international agreement prescribes full health insurance.
- = Document certifying full health insurance.
- = Documents certifying living including the costs of health provision.

In the course of the procedure the alien policing authority may request you to submit further documents.

You may request the proceeding alien policing authority to obtain a certificate relating to the data indicated by you from another authority. In respect of your personal data, this part of the application shall qualify as a consent to data handling or forwarding. In case the necessary data are obtained by the proceeding alien policing authority, you must fulfil your obligation to pay the required duty or administrative service fee to the alien policing authority.