

## The Immigration and Deportation Act, 2010 (Act No. 18 of 2010)

	The Immigration a					2		
	APPLICATION TO CHANGE				S() CONDITIONS	•		
OF TEMPORARY RESIDENCE PERMIT ( ) (Section 27(7) of the Immigration and Deportation Act, 2010)								
(Section 21 (1) o		Shaded fields   Permit/Visa						
Please complete in block letters		for official						
		use only	Date and	d Time				
	mation Required	Information Provided √					V	
1.	Personal details							
	Surname							
	Other names							
2.	Sex (Tick ( $$ ) as applicable)	Male			Female			
3.	Date of birth (dd/mm/yyyy)			•				
4.	Place of birth	Town		Cou	ntry			
5.	Nationality	1		"	-			
6.	Address in Zambia							
7.	Type of permit held							
8.	Permit No.							
9.	Date of issue of permit							
10.	Place of issue of permit							
11.	Date of expiry of permit							
12.	Permit to be applied for (This should							
	be completed by an applicant who wishes to change the applicant's							
	residence status)							
13.	Reasons for changing residence status							
14.	Conditions to be varied							
15.	Reasons for variation							
DEC	LARATION							
T 1	oby declare that the information formities	1 hv. ma :	anliastica i- 1		and complete to the 1	2004 of		
I hereby declare that the information furnished by me in this application is true, correct and complete to the best of my knowledge.								
Allowicuse.								
I understand that any incorrect, misleading or untrue information or the withholding of any relevant information may								
	t my application to change my temporary	residence status	or the condit	tions of my	temporary residence	permit or		
shall	result in the revocation of the permit.							
			•••••	••••				
	Name of applicant	Sign	ature		Date			
NOT	TE TO APPLICANT							
Section 28(8) of the Immigration and Deportation Act, No. 18 of 2010, provides that an application by a								

foreigner for a change in status shall not change the status of the foreigner or entitle the foreigner to sojourn in Zambia pending the decision in respect of that application.						
FOR OFFICIAL USE ONLY						
Received by:						
Officer (Name and Signature)	Date					
Amount Received:						
Receipt No.:						
Type of Permit No.:						
File Ref. No.:	OFFICIAL STAMP					
Remarks:						