



27

BI-84

DEPARTMENT: HOME AFFAIRS
REPUBLIC OF SOUTH AFRICA

APPLICATION FOR VISA OR TRANSIT VISA
[Section 7 (1) (g) read with sections 10A and 10B;
Regulation 8 (1)]

Failure to complete this application form in full may result in the visa being delayed or refused.
Please use block letters and black ink only.

PERSONAL PARTICULARS

Surname	ALZAROOVI										
First names (in full)	AMIN JAFFAR ABDULLA										
Maiden name											
Previous surname(s)											
	Y	Y	Y	Y	M	M	D	D			
Date of birth									City of birth DUBAI		
Country of birth	UNITED ARAB EMIRATES										
Gender	Male	<input checked="" type="checkbox"/>	Female								
Nationality	UNITED ARAB EMIRATES								If acquired by naturalisation, state original nationality		
Where and when was present nationality obtained											
Passport/Travel Document Number								Issuing authority DUBAI			
Type of document: Diplomatic/Official/Ordinary Passport/Travel								Date of expiry 14/12/2018			
Document/other (Specify)											
Permanent residential address THE PALM, JUMEIRAH											

Period resident at this address <u>54 YEARS</u>		Telephone number(.....) (code) <u>0564030050</u> (number)	
Country of permanent residence <u>UAE</u>		Period resident in that country <u>54 YEARS</u>	
Occupation or profession <u>BUSINESS</u>			
Name, address and telephone no. of employer, university, organisation, etc. to which you are attached, or that you attend or which you represent _____ _____ _____			
If self-employed, state name, address, telephone no. and nature of business <u>MILLENIMUM REAL ESTATE REGISTRATION LLC</u> <u>SHEIKH ZAYED ROAD, DUBAI ; TEL: 043994499</u> <u>REAL ESTATE BUSINESS</u>			
Marital status	<input type="checkbox"/> Never married	<input type="checkbox"/> Married	<input checked="" type="checkbox"/> Widowed
First name(s) of spouse		<u>MERIEM ABDALLA</u>	
Maiden name		<u>AL HAJ AL ZAARONI</u>	
Date of birth		Y Y Y Y M M D D [REDACTED] Nationality <u>UAE</u>	
NB: SEPARATE FORMS MUST BE COMPLETED IN RESPECT OF PERSONS OVER THE AGE OF 16 AND CHILDREN UNDER THE AGE OF 16 TRAVELLING ON THEIR OWN PASSPORTS			
Particulars of children endorsed on your passport accompanying you:			
Surname	First name(s)	Date of birth	Place of birth
(1)			
(2)			
(3)	<u>N/A</u>		
(4)			

VISIT TO SOUTH AFRICA

Expected date of arrival in the Republic Y <u>2015</u> M <u>OCT</u> D <u>13</u>	
Place of arrival <u>JOHANNESBURG</u>	
Purpose of visit <u>BUSINESS</u>	
Duration of stay (months, weeks or days) <u>ONE WEEK</u>	
Number of entries required	
Single	
Multiple	<input checked="" type="checkbox"/>
Two	

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

26 SAXONWOLD DRIVE, SAXONWOLD, JOHANNESBURG

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

Indicate by means of an X whichever is applicable

Have you at any time applied for a permit to settle permanently in South Africa?	yes	no	X
Have you ever been restricted or refused entry into South Africa?	yes	no	X
Have you ever been deported from or ordered to leave South Africa?	yes	no	X
Have you ever been convicted of any crime in any country?	yes	no	X
Is a criminal action pending against you in any country?	yes	no	X
Are you an unrehabilitated insolvent?	yes	no	X
Are you suffering from tuberculosis or any other infectious or contagious disease or any mental or physical deficiency?	yes	no	X
Have you ever been judicially declared incompetent?	yes	no	X
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	X

Give particulars if reply to one or more of the questions above is in the affirmative:

To be completed by applicants applying for visitor's permits exceeding three months:

In the case of a spouse or dependant minor child of the holder of a permit issued in terms of section 11, 13, 14, 15, 17, 19 or 22, submission of a marriage certificate or an unabridged birth certificate.

Proof of academic sabbatical, if applicable.

Proof of non-remunerative voluntary or charitable activities to be undertaken, if applicable.

Proof of research to be undertaken, if applicable.

Proof of funds available for subsistence during period of visit.

To be completed by applicants applying for diplomatic, official or courtesy visas:

In the case of an official visit, submission of a note verbale.

In the case of a diplomatic placing in the Republic, proof of such placing.

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)

To be completed by persons wishing to work in the Republic

☐ Yes

☐ No

If the answer is yes, please provide details

I SOLEMNLY DECLARE THAT THE ABOVE PARTICULARS PROVIDED BY ME ARE TRUE IN SUBSTANCE AND IN FACT AND THAT I FULLY UNDERSTAND THE MEANING THEREOF. I FURTHER DECLARE THAT I DO NOT CONTEMPLATE CHANGING THE PURPOSE OF MY VISIT WHILST IN THE REPUBLIC.


Signature of applicant

OCT 05, 2015
Date

FOR OFFICIAL USE ONLY

Approved/not approved byon.....

Type of visa

Reasons for decision