Directorate of Investment and Company Administration

VISA Application Form | Application for recommendation for visa extension

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If there is insufficient space on the form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.

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ompany's principal activity o	r current activities	
Name and address of an		
The Officer must be director/aut	horized officer/secretary of the Company.	
Full name in English (required)	Gender	
	Male Female	
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4. Name, address and other information for each Applicant A. First Applicant Photo Full name in English (required) (Name Mentioned in Passport) **Passport Number** Nationality Address for applicant in English (within the Union) Street number and street name Unit, level, etc. (if applicable) Quarter/City/Township Telephone Number Email State/Region Applicant's Designation in the Company Gender Visa Expiry Date Male Female Number of Times of Visa Extension Type of Visa (Single/Multiple/Stay Permit Only) Duration to extend the Visa (3 months/6 months/1 Year) Signed by an Officer of the Company I certify that the information in this form and any document attached to this form are true and correct and I will take responsibility for this applicant to stay in the Republic of the Union of Myanmar according to rule of law in Myanmar. Signature: Seal of the Company's Officer

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D. Applicant (Dependant)			000. 79	
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5. Lodged by	
Name:	
Address:	Telephone:
	Email:
6. Checklist	
The following must accompany this application form	m—
Copy of Passport Latest and VISA stamp page with	th (E-Visa) company seal & officer's signature (for each applicant).
License/Permit/Evidence from Government Age	ency or Business Contract with other Related Organization (If Any)