



REPUBLIC OF NAMIBIA

MINISTRY OF HOME AFFAIRS, IMMIGRATION, SAFETY AND SECURITY

Ministerial Head Quarters
Tel: (061) 2922111
Private Bag 13200
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**IMMIGRATION CONTROL ACT, 1993
APPLICATION FOR CERTIFICATE OF DOMICILE
(Section 22(1)(c)/ Regulation 30)**

**To: The Chief of Immigration
WINDHOEK**

1. Particulars of Applicant

Surname: _____

Maiden Name: (If Applicable) _____

First Names (In Full): _____

Date of Birth: _____

Telephone Number: _____ Email Address: _____

Cell Number: _____

Postal Address: _____

Sex:

MALE	☐
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FEMALE	☐
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2. Passport or Other Travel Document:

Number: _____

Issuing Authority: _____ Place of Issue: _____

Date of Issue: _____ Date of Expiry: _____

3. Present Residential Address: _____

4. Name and Address of Employer: _____

5. Marital status:

Married		Widow widower		Separated		Divorced	
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6. Particulars of Namibian spouse:

Surname: _____ Maiden Name: _____

First Names: _____ Date of Birth: _____

Residential Address: _____

Postal Address: _____

Telephone Numbers: (Home) _____ (Business) _____

Cell Number: _____

7. Particulars of accompany child(ren)

Surname: _____

First Names (In Full): _____

Date of Birth: _____

Passport Number: _____

Date of Issue of Passport: _____

Passport Issued by: _____

Date of Expiry of Passport: _____

8. Information Pertaining to Previous Marriage:

Surname of Spouse: _____

First Name(s): _____

Date of Birth: _____ Nationality: _____

Telephone Number: _____ Cell Number: _____

9. Resident in Namibia Since (date): _____**10. Permit or Other Document Authorising Entry Into and Residence in Namibia:**

(Attach copy of document)

The applicant declares that he or she is applying for a Certificate of Domicile for purposes of section 22(1)(c) of the Immigration Control Act, 1993 (Act No. 7 of 1993) and that the information and documents furnished in this application are true and correct.

Date of Expiry: _____

Issued at: _____

Signature: _____

Photograph of
holder

Left thumb

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