

### Clark Development Corporation **CUSTOMER SERVICE DEPARTMENT**

Clark Special Economic Zone Clark Field, Pampanga (045) 599-9000 local 641 to 644 (045) 599-2045

2x2 colored picture

#### APPLICATION FOR SPECIAL CLARK INVESTOR'S VISA (SCIV) Please check:

	Please check:	PRINCIPAL New Application	on		DEPENDENT Renewal/Extension	1	
Name Fi	rst Name		Middle Ini	tial	Las	st Name	
Age	Sex (please ch	neck):	Male		Female		
Permanent Address/	Telephone No.						
Philippine Addr (Residence)	ess 						
Nationality		Civ	il Status (Si	ingle, Mai	rried, etc.)		
Birthplace	-						
Birthdate		т	1 /				
Passport No. Issued On	-		ied at				
Issued On		vai	id Until				
Name of Locator/Co Economic Zone, Phi		pecial					
Address							
First time in the Phi If no, please provide entry into the Philip	e information on y	Yes your		N			
Date Kin		nd of Visa			Length of Stay		
Arrival Date Kind of Visa	:			ure Date tion Date	: _		
Have you ever been	deported from the	Philippines be	efore?		Yes	No	_
If yes, why?							
Date of return		Por	t of Arrival				



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### APPLICATION FOR SPECIAL CLARK INVESTOR'S VISA (SCIV)

DEPENI Spouse Children		S ACCOMPANYING THE PRINCIPAL IN TO Name	HE PHILIP Age	PINES Sex	Nationality					
	_									
The follo	owing d	locuments [original] in support of these statement	ts are submi	tted:						
	a)	Letter request to CDC-CSD (include names of	accompanyi	ng dependents	s, if any);					
	b)	Passport;	1 3	C 1	, 3,,					
	b)	National Bureau of Investigation (NBI) Clearance;								
	<ul> <li>c) Certification from an authorized officer (not lower than assistant vice president or equivaler applicant's agent bank in the Philippines that the applicant has made an inward remittance is amount of US\$250,000.00 or its equivalent in foreign currency;</li> <li>d) Credit advice from the said bank <u>OR</u> Bangko Sentral ng Pilipinas (BSP) currency declar form duly accomplished at any established port of entry in the Philippines (i.e. Ninoy Account)</li> </ul>									
		International Airport) if foreign currency brought are in currency notes;								
	e)	BSP certification of inward remittance;								
f)		Written and sworn declaration that the investment shall be within the Clark Special Economic Zone; Certificate of allocation issued by the President of the Investor firm/entity that it has allocated								
										g)
render service to the said investor within the Zone;										
i)	Certificate of Registration issued by CDC Permit to Operate issued by CDC									
									j)	
	k)	Application and Visa processing fees								
Requiren	a)	or dependents accompanying the SCWV applican Birth and/or Marriage Certificates for dependent NBI Clearance for dependents who are 18 yrs old	s and/or spo	ouse;						
A fee of application	on of v	or its Peso equivalent at current of isa.  licant 18 years of age and above shall file separat			charged upon filing of					
A notaria	al fee fo	or each SCIV certificate is imposed.								
	т	Date of Application	A nnlicous	'a Signature a	ver Printed Name					
	1	Pate of Application	Applicant	s Signature o	ver Frinted Name					
Subscribe		sworn to before me this day of		ٔ و و_	affiant exhibiting to me					



# Clark Development Corporation CUSTOMER SERVICE DEPARTMENT

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# APPLICATION FOR SPECIAL CLARK WORKING VISA (SCWV) Please check: PRINCIPAL DEPENDENT New Application Renewal/Extension

	New Appl	ication		Renewal/Extension	
Name First Name		Middle I	nitiol	Last Na	uma
That Name		Wilduic I	iiitiai	Last No	inic
Age Sex (p	olease check):	Male		Female	
Permanent Address/Telephone	e No				
Philippine Address (Residence)					
NationalityBirthplace		Civil Status (	Single, Ma	rried, etc.)	
Birthdate					
Passport No.		Issued at			
Issued On		Valid Until			
Employing Company Abroad, Company Address	if any				
Telephone/Fax No. Position/Function					
Employing Locator/Compan Economic Zone, Philippines Locator's Address	y in Clark S	pecial			
Telephone/Fax No. Position/Function Length of time of employment			_		
Compensation/Salary to be rec	eived (in US\$ or F	eso)	-		
First time in the Philippines?	Yes		No		
If no, please provide informati	on on your previou	us entry into th	e Philippin	es:	
Doto	Vind of Vi			Langth of Store	
Date	Kind of Vi	Sa		Length of Stay	
Have you ever been deported f If yes, why?	rom the Philippine	es before?		Yes	No
Arrival Date		Depar	ture		
Port of Arrival		Vesse	l Name		
Kind of Visa		Expira	ation Date		



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### APPLICATION FOR SPECIAL CLARK WORKING VISA (SCWV)

DEPENDEN	TS ACCOMPANYING THE PRINCIPAL IN T  Name	THE PHILI Age	PPINES Sex	Nationality								
Spouse Children	Ivanic	Age		Nationality								
- -												
EOD NEW A	DDI ICATION de Cilemine de consente l'acciona											
FOR <u>NEW A</u>	<b>PPLICATION</b> , the following documents [original] in support of these statements are submitted:											
a)	Letter request to CDC-CSD (include names of accompanying dependents, if any)											
b)	Passport	fan annliaan	4? a aamsi aaas									
<ul> <li>b) Contract of Employment entered into by locator for applicant's services;</li> <li>c) Alien Employment Permit (AEP) issued by the Department of Labor and Employment Region</li> <li>d) Affidavit of Support/Guarantee executed by an authorized officer of the locator;</li> <li>e) National Bureau of Investigation Clearance;</li> </ul>												
							<ul><li>e) National Bureau of Investigation Clearance;</li><li>f) Copy of Passport with the latest arrival visa and updated visa, if any;</li></ul>					
							g)	Certificate of Registration issued by CDC Permit to Operate issued by CDC Application and Visa processing fees				
h)												
g)												
<u> </u>												
Requirements	for dependents accompanying the SCWV applicar	<u>1t</u>										
b) c)	Birth and/or Marriage Certificates for dependent NBI Clearance for dependents who are 18 yrs old											
FOR <b>RENEV</b> requirements:	WAL/EXTENSION, the following documents [	[original] a	re submitted	in compliance with the								
-												
	Letter request for renewal/extension to CDC-CSD	1										
	Extended Contract of Employment											
	Extended Alien Employment Permit	. 1										
	Copy of Passport with latest arrival visa and update ASS 1 (1)											
	Affidavit of Support/Guarantee executed by a auth	iorized offic	er of the locate	r								
1)	Application and Visa Processing Fee Permit to Operate issued by CDC											
J)	Termit to Operate issued by CDC											
A fee of US\$_	or its Peso equivalent at current ex	xchange rate	es will be charg	ged upon issuance of visa								
Children of ap	oplicant 18 years of age and above shall file separate	te application	ons .									
A notarial fee	for each SCWV certificate is imposed.											
CDC reserves	the right to impose additional requirements it dee	ems necessai	ry to process th	is application								
	Date of Application	Applicant	s Signature o	ver Printed Name								
~				99								
Subscribed ar	nd sworn to before me this day of		_,, ;	affiant exhibiting to me issued at								