



Republic of Malawi
Ministry of Foreign Affairs and International Cooperation

Form: ERP 11/19/07

Extension of Residence Permit

<p><i>From:</i> Secretary for Foreign Affairs and International Cooperation, P.O Box 30315 Lilongwe</p>	<p><i>To:</i> The Commissioner General Malawi Revenue Authority, <i>Att:</i> Station Manager, Lilongwe</p> <p>The Chief Immigration Officer Department of Immigration <i>Att:</i> Station Manager, Lilongwe</p>
---	---

To be completed in Duplicate

Details of Applicant		
Name		
Designation		
Name of Predecessor		
Mission/International Organisation		
Nationality		
Date of Birth		
Passport Number		
Place of Issue		
Date of Issue		
Date of Expiry		
Date of Arrival		
Extension details	Expiry of Initial Contract	Extension required up to:

Signature of Applicant.....

Date.....

For Official use by the Department of Protocol Only

Notification number..... Diplomatic ID Type.....

Diplomatic ID Number.....

Name of Officer.....

Signature.....

Date.....

