

## **Rental Declaration Form**

## THIS FORM MUST BE FILLED BY THE OWNER OF THE RESIDENTIAL PROPERTY INDICATED IN THE LEASE AGREEMENT SUBMITTED BY THE APPLICANT. THIS SERVES AS A CONFIRMATION OF THE ADDRESS INDICATED BY THE APPLICANT ON THE APPLICATION FOR A RESIDENCE DOCUMENT SUBMITTED TO THE AGENCY

1. <u>Tenant's Details</u>	
Name	
ID no	Telephone no
Address	
Email	
2. <u>Property Owner's Details</u>	
Name	
ID no	Telephone no.
Address	
Email	
Please indicate the duration of the letti	ng of the property named in point 1.
From	To
<b>Aģenzija Komunità Malta</b> Mediterranean Conference Centre,	

Old Hospital Street, Valletta, Malta. VLT 1645 T: +356 21 225 232 E: info@komunita.gov.mt W: www.komunita.gov.mt



## 3. <u>Declaration</u>

I declare that the property address detailed is exclusively leased to the named tenant and that the information provided in this form is correct and complete. I am also aware that if any declaration, statement or information provided is false or incorrect, I will be liable to criminal responsibility in accordance with Articles 188 and 189 of the Criminal Code (Chapter 9 of the Laws of Malta) and Article 32 of the Immigration Act (Chapter 217 of the Laws of Malta) as well as any other law or regulation which may be in force at the time of the unlawful declaration. Such actions can also result in deprivation of citizenship of the tenant and all subsequent liabilities.

My consent is being given for the information to be used for the purpose of an application for a residence document. Such data may be accessed by the Agency and any government entity that may be involved in the evaluation process of your application, in line with Maltese and EU law.

I declare that I am responsible to advise the Agency on <u>residence@komunita.gov.mt</u> once the tenant leaves the property of which I am the owner.

Owner's Signature	

Date \_\_\_\_\_