



**National Directorate-General for  
Aliens Policing  
Országos Idegenrendészeti  
Főigazgatóság**



**Application for a visa for guest investors**

|  |   |   |
|--|---|---|
| <i>For completion by the authority.</i>  |   | <div style="border: 1px solid black; width: 150px; height: 130px; margin: 0 auto; text-align: center; padding-top: 50px;">Facial photograph</div>   |
| <b>The foreign diplomatic/consular mission of Hungary receiving the application:</b><br>_____  |   |   |
| <b>Date of receipt of the application:</b><br>____ year ____ month ____ day  |   |   |
|  |   |   |
|  |   | <div style="border: 1px solid black; width: 400px; height: 40px; margin: 0 auto;"></div> <p style="text-align: center;">[Handwritten signature specimen of applicant<br/>(legal representative)]</p> <p style="text-align: center;">The signature must be inside the box in its entirety.</p> |
| <b>PLEASE COMPLETE THE FORM LEGIBLY, IN LATIN BLOCK LETTERS.</b>   |   |   |
| telephone number:  |   | email address:  |
| <b>I. Personal data of the applicant</b>   |   |   |
| 1. surname (as per the particulars of the passport):   |   | 2. forename (as per the particulars of the passport):   |
| 3. surname at birth:   |   | 4. forename at birth:   |
| 5. mother's surname at birth:  |   | 6. mother's forename at birth:  |
| 7. sex: <input type="checkbox"/> male <input type="checkbox"/> female  | 8. marital status: <input type="checkbox"/> unmarried <input type="checkbox"/> widow(er) <input type="checkbox"/> married <input type="checkbox"/> divorced |   |
| 9. date of birth:            year            month<br>day  | 10. place of birth (locality):  | 11. country:  |
| 12. citizenship:   |   |   |
| 13. Passport number, place and date of issuance: _____,            year            month            day  |   |   |
| 14. Type and date of expiry of the passport: <input type="checkbox"/> ordinary <input type="checkbox"/> service/official <input type="checkbox"/> diplomatic <input type="checkbox"/> other,            year            month<br>day |   |   |

|   |                  |           |        |                       |       |  |
|---|------------------|-----------|--------|-----------------------|-------|--|
| <b>II. Details of residence in Hungary</b>  |                  |           |        |                       |       |  |
| <b>15. Particulars of the applicant's place of accommodation / residence in Hungary</b>   |                  |           |        |                       |       |  |
| postal code:  | locality:        |           |        | name of public place: |       |  |
| type of public place:   | building number: | building: | block: | floor:                | door: |  |
| Legal title of residence in the place of accommodation: <input type="checkbox"/> owner <input type="checkbox"/> (sub)tenant <input type="checkbox"/> family member <input type="checkbox"/> courtesy user of accommodation <input type="checkbox"/> other:  |                  |           |        |                       |       |  |
| <b>16. Purpose of applying for a guest investor visa</b><br><input type="checkbox"/> <b>Acquisition of an investment fund share issued by a real estate fund registered by the Hungarian National Bank</b><br>- the name of the distributor of the real estate fund/investment fund share:<br><br>- serial number of investment fund share:<br><br><input type="checkbox"/> <b>Acquisition of ownership of a residential property registered in the Land Registry of Hungary under its parcel identification/topographical LOT number, free and clear of all liens, claims and encumbrances</b><br>- parcel identification/land register reference number (topographical LOT no.) of the real estate:<br><br>- address of the real estate (postal code, locality, name of the public place, etc.):<br><br><input type="checkbox"/> <b>Provision of a financial donation in an amount and for a purpose specified by law to a tertiary education institution maintained by a public trust with a public-service mission</b><br>- amount of donation:<br><br>- purpose of donation:<br><br>- name of the public trust with a public-service mission:<br><br>- name and central address of the tertiary education institution: |                  |           |        |                       |       |  |
| <b>17. Applicant</b><br><input type="checkbox"/> has<br><input type="checkbox"/> intends to make<br><b>the investment referred to in Point 16.</b><br>Applicant<br><input type="checkbox"/> has (in Hungary; or the amount is transferable to Hungary),<br><input type="checkbox"/> does not have<br>the amount required for the investment pursuant to Article 16 (3) of Act XC of 2023.   |                  |           |        |                       |       |  |
| <b>18. The amount needed for the investment is</b><br><input type="checkbox"/> a property, right of property value, asset recorded in an authentic instrument/private document with full probative force;<br><input type="checkbox"/> regular taxable income from a legal relationship of employment or pursuing business activity.   |                  |           |        |                       |       |  |
| <b>19. I undertake to carry out the investment referred to in Point 16 within three months from my entry to Hungary with a guest investor visa. I understand that the failure to comply with the obligations will result in the visa being revoked.</b>   |                  |           |        |                       |       |  |
| <b>20. Transaction number of payment if made by an electronic payment instrument or by a bank deposit:</b>  |                  |           |        |                       |       |  |
| <b>I hereby declare that the information described above is true and correct.</b><br>Date: ..... Signature: .....   |                  |           |        |                       |       |  |
| <b>INFORMATION</b><br><i>During the process, the immigration authority may request further documents for ascertaining the relevant facts of the case.</i>   |                  |           |        |                       |       |  |