

EMBAIXADA DE PORTUGAL

ABU DHABI

PORTUGAL CHECKLIST RESIDENCY VISA (D TYPE)

D7 - Fixed Residence (Retirement, Religious purpose or Individual Revenues)

Name and surname of the applicant:		
Email Address:		
Direct Phone Contact: Reese for Travel to Portugal:		
	YES	NO
<u>National Application Form</u> (completed in full and signed by the applicant. Handwritten forms are not accepted)		
<u>2 Photos (1 pasted in application form)</u>		
Passport or other travel document valid after the expected date of return		
<u>Travel Medical Insurance</u> valid to cover the expense necessary for medical reasons, including urgent medical care and possible repatriation in case of death.		
<u>Certificate of Criminal Record</u> issued by the competent authority of the country of nationality of the applicant or the country of residence for more than one year. Police clearance is MANDATORY to be authenticated and stamped by UAE MoFA.		
A request for consultation of the Portuguese criminal registry for the SEF		
For Religious Purposes		
Certificate from the church or congregation they belong to, as long as such church or congregation is recognized by the Portuguese legal system.		
For Retirement Purposes		
Document certifying retirement amount		
For People Living out from Personal Revenue		
Document certifying revenue from movable and immovable property; intellectual or financial assets.		
The lease agreement signed on the last page by both (Landlord and Tenant) and rubricated on each page by both.		
The bank documents from the Portuguese Bank (example: Millennium BCP, Novobanco, etc.) stamped and authenticated by a lawyer in Portugal.		
Note •Failure to submit all the necessary documents may lead to the rejection of the visa application. •The Consular Post reserves the right to request documents other than those mentioned above whenever it deems convenient.		

•Even if all the documents necessary for the process are presented, it doesn't imply the automatic granting of the visa. Refusal of the visa

application shall not entitle to reimbursement of the visa fee.

Remarks

Applicant's Signature:______Date:_____Submission Officer:______