# E-200



# UTL ÚTLENDINGASTOFNUN DIRECTOR ATE OF MONTH

Móttekið:

Málsnúmer:

# **APPLICATION FOR FAMILY REUNIFICATION** WITH AN EEA/EFTA CITIZEN RESIDING IN ICELAND **APPLICATION FOR FIRST PERMIT**

#### For whom is this form intended?

Immediate family members of citizens of EEA/EFTA member states, who are citizens of countries outside of the EEA/EFTA, may reside in Iceland if their residence is based on the rights of a citizen of an EEA/EFTA member state residing in Iceland.

#### Immediate family members of EEA/EFTA citizens are:

- Spouse or cohabiting partner.
- Descendants, i.e. children or grandchildren of the EEA/ • EFTA citizen or his/her spouse, who are under the age of 21 or are dependants.
- Dependent direct relatives in the ascending line and those of the spouse or cohabiting partner (parents/ grandparents).

#### How to apply?

Applications can only be submitted in paper form, either by regular mail to the Directorate of Immigration or delivered to the drop box in the Directorate's lobby in Dalvegur 18, 201 Kópavogur. Applications can also be submitted at the offices of District Commissioners outside the capital area.

It is the applicant's responsibility to submit satisfactory documents with the application. Failure to submit satisfactory documents may result in delays of the procedure or in the application being rejected.

The Directorate of Immigration may request additional documents when deemed necessary.

1. Applicant (non-EEA / EFTA citizen)						
Given name						
Surname						
ID number / Date of birth						
Gender		Male		Female		Non-binary/other
Nationality			Phone nun	nber		
Address abroad						
Address in Iceland						
Postcode			Email addr	ess		
Travel document no.			Date of iss	ue		Valid until

# 2. Ties with Iceland or other Schengen countries

If your application will be denied and you are still in Iceland the Directorate of Immigration is obligated to issue an expulsion. With a decision on expulsion the Directorate generally issues a period of voluntary departure. If you do not leave the country within the given period of voluntary departure an entry ban is activated, which is usually valid for the entire Schengen-area. Hereby you are given the opportunity to provide information that may be relevant to the expulsion decision and to object to that decision. If you do not fill in this part of the application form, it is regarded as you do not object to an expulsion if your application will be denied. If there are any changes in you circumstances, it is important that you inform the Directorate as soon as possible so that can be taken into account.

|--|

If yes, what ties?

Are there any reasons that could lead to that a decision on an expulsion and an entry ban to the Shcengenarea would be considered an unfair measure towards you or other members of your family? Yes D No

If yes, what reasons?

# 3. Applicant's relative in Iceland (EEA / EFTA citizen)

Given name					
Surname					
ID number / Date of birth					
Gender		Male		Female	Non-binary/other
Nationality		·	·	Email address	
Relationship with applicant		Spouse		Cohabiting partner	Child
Parent	Other?				
Basis of stay in Iceland		Employee		Student	Individual with private means of support
If your relative in Iceland is your	spouse/co	phabiting partner, pleas	e state	when and how you met?	



3 / 5

Parent 1				
Name	Date of	birth	Nationality	Country of residence
Parent 2				
Name	Date of	birth	Nationality	Country of residence
Spouse/cohabiting partne	r			
Name	Date of	hirth	Nationality	Country of residence
Children				
Name	Date of	birth	Nationality	Country of residence
5. Give information a	bout your relatives i	n Iceland not st	ated in part two ar	nd three
I have no relative	s/family member in Icel	and	I have the followi members in Icela	ng relatives/family nd
Name	D	ate of birth	Nationality	Family relations

6. Re	6. Residence in Iceland					
When do you intend to come to Iceland?		State the date (dd.mm.yy)				
Have arrived in Iceland State the date (dd.mm.yy)						
Have you ever applied for a visa to come to Iceland?				Yes		No



E-200	4/5
-------	-----

Have you previously applied for a residence permit in Iceland?	Yes	No
Have you been in Iceland before? If yes, then when and how long?	Yes	No

# 7. Agent

You only need to fill in this part of the application if you want to give power of attorney to an agent during the processing of this application. You can only have one agent at a time. If you wish to cancel or change your agent, you must communicate this in writing to the Directorate of Immigration.

Information about your agent				
Name				
ID number / Date of birth				
Address				
Phone number				
Email address				
Security number*				

\*A four digit security number must be provided for the purpose of obtaining information about the applicant's case from the Directorate of Immigration. The security number should be treated like a password and only be known to the person concerned.

### 8. Did you remember everything?

The Directorate recommends that you use the checklists below to make sure your application is satisfactory.

#### Checklist - Necessary documents to accompany all applications

**Photocopies of your passport's personal information page and signature page.** The passport must be valid.

Confirmation of family ties as applicable (i.e. marriage certificate, marriage status certificate, birth certificate, death certificate, custody document, divorce document, cohabitation certificate). The document must be confirmed by apostille stamp or double authentication if issued abroad. The document must be an original or a confirmed copy of the original. See information on the format of supporting documents. www.utl.is

Confirmation of the purpose of stay of the EEA/EFTA citizen in Iceland. Documents must be submitted proving that the EEA/EFTA citizen still fulfills the requirement for being registered in Iceland, i.e. payslips, work contract, confirmation of school admission.

# 9. Additional documents to be submitted with an application for a residence card for descendants and direct relatives

When applying for dependent descendants, 21 years and older, or dependent direct relatives, in the ascending line, of an EEA/EFTA citizen or his spouse, the following documents must be submitted:

Documents confirming that the EEA/EFTA citizen can provide for his/her or his/her spouse is decendant or direct relative, i.e. with an employment contract or payslips.

Documents confirming that the decendant / direct relative already has been provided for by the EEA/EFTA citizen.



Π

E-200

5/5

#### 10. Date and signature

П

The Directorate of Immigration may obtain further information about you from domestic and / or foreign parties if this is necessary for the application, in order to ensure that the information is correct and / or to verify the validity of certificates. The Act no. 90/2018 on Data Protection and the Processing of Personal Data is always respected when gathering information. The Directorate of Immigration, the Immigration and Asylum Appeals Board, Registers Iceland, child protection authorities and the police are permitted to process and combine personal information in accordance with the instructions of the Act on Foreigners and Act on Data Protection and the Processing of Personal Data. In addition, the same parties may obtain information from the tax authorities, the Directorate of Labor and municipalities' social services to ensure that your stay is legal.

If the application is approved, the Directorate of Immigration will forward information to Registers Iceland that is necessary for registration in the National Registry.

Information about you may be used in the processing of later applications and / or applications from family members to ensure that the information is correct. During the period of validity of the residence card, the Directorate of Immigration may examine your data if information about changed circumstances or the validity of documents is received. Incorrect or misleading information can lead to a residence card rejection, revocation and possibly an expulsion. Incorrect provision of information to the Directorate of Immigration is a violation of the Act on Foreigners and punishable under the General Penal Code no. 19/1940.

The Data Protection Policy is available on the Directorate's website.

Applicants from certain countries must undergo a medical examination within two weeks of arrival in the country in accordance with the laws and instructions of the Directorate of Health.

I confirm that I have read the above information and that all the information I have provided regarding my application for a residence right for family reunification is true and correct.

I wish that the Directorate contacts me through:					
	Email			Regular mail	
Place,	Place, date and signature				
Place					
Date					
Applica	nt's signature				

## 11. To be filled in by the applicant's relative.

I hereby confirm that I am the EEA/EFTA citizen on whom this application for a residence right for family reunification is based on and grant the Directorate of Immigration permission to obtain information from other authorities, including the National Register of Iceland, the Iceland Revenue and Customs and the Directorate of Labour, if necessary, to confirm that my stay in Iceland is in accordance with section XI of the Immigration Act no. 80/2016 and submitted application.

	I confirm that I have rea	d the information above.
	I give my approval for th	
Place		
Date		
Applica	nt's relative signature	

