

Statement of Non-Residency

Date:

To Whom It May Concern,

I, , hereby declare that I am not a resident of for the period commencing on and ending on .

I confirm that during this period, my permanent address is as follows:

Reason for Non-Residency:

I declare that the information provided above is true and correct to the best of my knowledge.

Signature:

Printed Name:

Date: