

# Non-Residence Compliance Certificate

Certificate No.:

This is to certify that the following individual has complied with the Non-Residence regulations as stipulated by local authorities.

**Full Name:**

**Passport/ID No.:**

**Country of Residence:**

**Purpose of Certificate:**

**Period Covered:**

Date Issued:

Authorized Signature: \_\_\_\_\_

Title:

Organization:

*This certificate is issued as per the prevailing laws and regulations concerning non-residence compliance and shall remain valid for the stated period above unless otherwise revoked.*