

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.