



Application for a Bridging visa B

To seek permission to travel

Please open this form using Adobe Acrobat Reader.
Type (in English) in the fields provided.

Tick where applicable

If a question does not apply to your situation, type 'N/A' for not applicable.

Part A – Personal details

1 Receipt number (this is on the receipt you were given when you last made an application for a visa)

2 Your family name

3 Your given names

4 Your date of birth

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

5 Your current residential address in Australia

Note: A post office box address is not acceptable as a residential address. Failure to give a residential address will result in your application being invalid.

<input type="text"/>
<input type="text"/>
Postcode

Part B – Details from your passport

6 Details from your passport

Passport number

Country of passport

Date of issue

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of expiry

Issuing authority/place of issue as shown in your passport

Class of visa currently held or last held

Please provide the 13-digit visa grant number, as shown on the letter notifying the applicant of the grant of the visa.

Visa grant number

Part C – Contact details

7 Address for correspondence
(If the same as your residential address in Question 5, write 'AS ABOVE')

<input type="text"/>
<input type="text"/>
Postcode

If any other applicants are included in this application (see Question 15), is this the address at which the Department may correspond with those other applicants?

No Give details of the address for correspondence for other applicants separately in writing or on form 929 *Change of address and/or passport details*.

Yes

8 Your telephone numbers

Office hours (Area code)

After hours (Area code)

Mobile/cell

9 Do you, and the other applicants included in this application (if any), agree to the Department communicating with you by email or other electronic means?

No

Yes Give details

Email address

Part D – Application details

10 Your substantive visa application

What type of substantive visa (ie. a visa other than a bridging visa) have you applied for?

Where was the application lodged?

Please provide one of the following:

Substantive visa application receipt number

TRN

File number

11 Judicial review

(Please complete if you are awaiting the outcome of judicial review proceedings relating to your substantive visa application.)

Date of the letter from the Department notifying you of the refusal of your substantive visa application.

Day Month Year

If you sought merits review of that refusal, please provide the date of the letter notifying you of the decision of the review authority.

Day Month Year

Date on which your judicial review application was lodged.

Day Month Year

Please provide a copy of the application, and any notice of appeal, which shows the court registration number and endorsement by a Registrar.

If you are unable to provide this information the Department will need to verify your claim by internal enquiries or by contacting a solicitor acting on your behalf.

If applicable, please provide the name and phone number of your solicitor.

Name of solicitor

Telephone number (Area code)

12 Intended overseas travel

Destination (Country and region/town/city)

Date of expected departure Day Month Year

Date of expected return

Purpose of intended travel

13 Notification of change of address during period of travel

If you are awaiting a decision on your substantive visa application (either from the Department or a merits review authority) and you intend to reside at an address overseas, for a period of 14 days or more, you must advise of the address at which you will be and of the period that you intend to be there.

Overseas address

Postcode

Period of intended stay

Day Month Year to Day Month Year

14 Address for correspondence during period of travel

(If the same as address given at Question 13, write 'AS ABOVE'.)

Note: Unless otherwise advised this will be the address that the Department uses to correspond with you and the other applicants included in this application (if any) during the period of your intended overseas travel.

If you wish another person to receive communications from the Department during the period of your intended travel, and you have not yet given authorisation for that person to receive communications, you must advise the Department in writing (you may use form 956 *Appointment of a registered migration agent, legal practitioner or exempt person* for this purpose).

Postcode

Phone number (Area code)

Period of using this address for correspondence

Day Month Year to Day Month Year

Part E – Additional applicants

- 15** Give details of members of your family who are applying for a Bridging visa B and will be travelling.

Note:

- If any member of your family is travelling for different reasons, please provide reasons below.
- A post office box address is not acceptable as a residential address. Failure to give a residential address will result in your application being invalid.
- Unless otherwise advised in writing or on form 929 *Change of address and/or passport details*, the Department will communicate with the additional applicants in the same manner, and at the same address, as has been requested by the main applicant (see Questions 7, 9, 14 and 22).

Applicant 2

Family name

Given names

Day Month Year

Date of birth

Current residential address in Australia

<input type="text"/>
<input type="text"/>
Postcode

Reason(s) for travel if different to main applicant

<input type="text"/>
<input type="text"/>
<input type="text"/>

Details from their passport

Passport number

Country of passport

Day Month Year

Date of issue

Date of expiry

Issuing authority/place of issue as shown in their passport

<input type="text"/>
<input type="text"/>

Applicant 3

Family name

Given names

Day Month Year

Date of birth

Current residential address in Australia

<input type="text"/>
<input type="text"/>
Postcode

Reason(s) for travel if different to main applicant

<input type="text"/>
<input type="text"/>
<input type="text"/>

Details from their passport

Passport number

Country of passport

Day Month Year

Date of issue

Date of expiry

Issuing authority/place of issue as shown in their passport

<input type="text"/>
<input type="text"/>

Applicant 4

Family name

Given names

Day Month Year

Date of birth

Current residential address in Australia

<input type="text"/>
<input type="text"/>
Postcode

Reason(s) for travel if different to main applicant

<input type="text"/>
<input type="text"/>
<input type="text"/>

Details from their passport

Passport number

Country of passport

Day Month Year

Date of issue

Date of expiry

Issuing authority/place of issue as shown in their passport

<input type="text"/>
<input type="text"/>

Part H – Options for receiving written communications

- 21** All written communications about this application should be sent to:
(Tick one box only)

Myself

OR

Authorised recipient ▶ You should complete form 956A *Appointment or withdrawal of an authorised recipient*

OR

Migration agent

OR

Legal practitioner

▶ Your migration agent/legal practitioner/exempt person should complete form 956 *Appointment of a registered migration agent, legal practitioner or exempt person*

OR

Exempt person

Part I – Payment details

22 Method of payment

Make your payment electronically through the 'My Payments' section of ImmiAccount. Sign into, or create, your ImmiAccount and select My Payments>Manage Payments>Pre-Pay Paper Service, at www.homeaffairs.gov.au/immiaccount

Do not provide credit card details on this form. Make your credit card payment electronically through the 'My Payments' section of ImmiAccount.

Payment receipt number from the 'My Payments' section of ImmiAccount

Provide a copy of your printed receipt.

Part J – Declaration

WARNING: Giving false or misleading information is a serious offence.

- 23** The following declaration must be signed and dated by all applicants aged 18 or over included in this application.

If you are lodging your application online, please tick the box below the Declaration. You are not required to sign or date this form.

I/we, the applicant(s), declare that:

- the information I/we have given in this form is complete, correct and up-to-date in every detail.
- I/we have read the information contained in form 1442i *Privacy notice*.
- I/we understand the Department may collect, use and disclose my/our personal information (including biometric information and other sensitive information) as outlined in form 1442i *Privacy notice*.

Agreed

Signature of main applicant

Day Month Year

Date

Signature of applicant 2

Day Month Year

Date

Signature of applicant 3

Day Month Year

Date

Signature of applicant 4

Day Month Year

Date

Signature of applicant 5

Day Month Year

Date

Signature of applicant 6

Day Month Year

Date

We strongly advise that you keep a copy of your application and all attachments for your records.