

Application for a Bridging visa B

To seek permission to travel

1006

Department of Home Affairs

Please open this form using Adobe Acrobat Reader.

type (in English) in the fields provided.	
Tick where applicable <a>I	
If a question does not apply to your situation, type 'N/A' for not applicable.	
Part A – Personal details	
Receipt number (this is on the receipt you were given when you last	Part B – Details from your passport
made an application for a visa)	6 Details from your passport
	Passport number
Your family name	Country of passport
	Day Month Year
	Date of issue
our given names	Date of expiry
	Issuing authority/place of issue as shown in your passport
Day Month Year	
our date of birth	
	Class of visa currently held or last held
our current residential address in Australia	
lote: A post office box address is not acceptable as a residential ddress. Failure to give a residential address will result in your	Please provide the 13-digit visa grant number, as shown on the letter
application being invalid.	notifying the applicant of the grant of the visa.
	Visa grant number
Postcode	
	Part C – Contact details
	7 Address for correspondence (If the same as your residential address in Question 5, write 'AS ABOVE
	in the dame as your residential dudiess in education of write ACADOVE
	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?

Give details of the address for correspondence for other applicants separately in writing or on form 929 *Change of*

address and/or passport details.

8	Your telephone	numbers			12	Intended over	seas trav	el				
	Office hours	(Area code)			Destination (Co	untry and r	region/	town/city)			
	After hours	(Area code)									
									Day N	/lonth	Year	
	Mobile/cell					Date of expecte	ed departur	e				
9	Do you and the	o othor applicar	ata inaludad in thi	a application (if any)		Date of expecte	ed return					
J		epartment comr		s application (if any), ou by email or other		Purpose of inter	nded trave	<u> </u>				
	No											
	Yes	ve details										
	Email address											
			ion details									
10	Your substan											
	What type of su		(ie. a visa other th	nan a bridging visa) h	nave							
	Where was the	application lod	ged?									
					13	Notification of	f change (of add	lroce duri	na nori	ind of t	ravol
	Please provide		•		13	If you are await	_			• •		
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	TRN					must advise of you intend to be	e there.	s at w	hich you w	ill be an	nd of the	e period that
	File number					Overseas addre	ess					
11	ludicial venia											
11		ete if you are av	vaiting the outcon ubstantive visa ap	me of judicial review						Postco	ode	
	Date of the lett your substantiv	er from the Dep e visa applicati	partment notifying	g you of the refusal of	f	Period of intend Day Month	ded stay Year	. [Day N	Month	Year	
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	Day Month	Year	NOTE OF THE TO VICTOR	authority.		Note: Unless of	•					,
						Department use			-			•
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	Day Month	Year				If you wish anot	ther persor	to red	ceive comr	nunicati	ions froi	m the
				ny notice of appeal, w		Department dur yet given author must advise the	risation for	that p	erson to re	eceive c	ommun	ications, you
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	•	m by internal er		Department will nee tacting a solicitor act		exempt person	for this pur	rpose).				
			e name and phon	e number of your solid	citor.							
	Name of solicit									Postco	ode	
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								to				

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).

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icant 3	
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	//place of issue as shown in their passport
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plicant 5			Part F – Health and characte	r
Family name				
Given names			These questions assist in determining that your r onot contrary to the public interest	eturn to Australia is
	Day Month Year	J	not contrary to the public interest	
Date of birth	Hall address in Assaults	16	Have you, or any other person included in this application, ever:	
Current resident	tial address in Australia]	• had, or currently have, tuberculosis?	No Yes
		-	• been in close contact with a family member	
	Destands	_	who has active tuberculosis?	No Yes
	Postcode		 had a chest x-ray which showed an abnormality? 	No Yes
Reason(s) for tra	avel if different to main applicant		If you answered ' Yes ' to any of the questions at C state who it applies to and give ALL relevant deta	
Details from the	ir nassnort			
Passport numbe]		
Country of	'L]]		
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Date of expiry				
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Given names				
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	Postcode			
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Date of expiry				
	y/place of issue as shown in their passport			
issumy authority	y, piace of issue as shown in their passport]		
		-		

Yes

Yes

Yes

Have you, or any other person included in this application, ever:				If you answered ' Yes ' to any question at Question 17, give details, including the date of the charge, the outcome and any penalty imposed.
 been charged with any offence that is currently awaiting legal action? 	No	Yes		Also provide court documents (for example sentencing remarks or court transcripts).
 been convicted of an offence in any country (including any conviction which is now removed from official records)? 	No 🗌	Yes		Where relevant, provide a copy of all declared orders (for example, any domestic or family violence orders, child protection orders, or orders that prohibit the applicant from having contact with another person for their personal protection). You are only requested to declare an order where
 been charged or convicted of family or domestic violence offences or similar related offences? 	d No 🗌	Yes		the applicant is the respondent or subject of the order. You are not asked to declare an order where the applicant is the person requiring personal protection.
 been the subject of a domestic or family violence order, or any other order, of a tribun or court or other similar authority, for the personal protection of another person? 	nal No 🗌	Yes		
 been the subject of an arrest warrant or Interpol notice? 	No	Yes		
 been found guilty of a sexually based offence involving a child (including where no conviction was recorded)? 	e No	Yes		
• been named on a sex offender register?	No	Yes		
 been acquitted of any offence on the ground of unsoundness of mind or insanity? 	ls No	Yes		
• been found by a court not fit to plead?	No 🗌	Yes		
 been directly or indirectly involved in, or associated with, activities which would represent a risk to national security in Australia or any other country? 	No 🗌	Yes		Part G – Assistance with this form
 been charged with, or indicted for: genocide war crimes, crimes against humanity, torture slavery, or any other crime that is otherwise a serious international concern? 	9,	Yes	18	Did you receive assistance in completing this form? No
 been associated with a person, group or organisation that has been/is involved in criminal conduct? 	No 🗍	Yes 🗌		Yes
 been associated with an organisation engag in violence or engaged in acts of violence (including war, insurgency, freedom fighting, terrorism, protest) either overseas or in Australia? 		Yes		Family name Given names Address
 served in a military force, police force, state 				
sponsored/private militia or intelligence agency (including secret police)?	No	Yes		Postcode
 undergone any military/paramilitary training, been trained in weapons/explosives or in the manufacture of chemical/biological products 		Yes 🗌		Telephone number or daytime contact Country code Area code Number
 been involved in people smuggling or people 		100		Office hours () ()
trafficking offences?	No 🗌	Yes		
 been removed, deported or excluded from a country (including Australia)? 	ny No 🗌	Yes		Mobile/cell
 overstayed a visa in any country (including Australia)? 	No	Yes	19	Is the person a registered migration agent, Australian legal practitioner or an exempt person?
 had any outstanding debts to the Australian Government or any public authority in Australia? 	No 🗌	Yes	20	No

17 Have you, or any other person included in this

Part H – Options for receiving written communications

21	All written communication (Tick one box only) Myself	ons about this application should be sent to:
	OR	
	Authorised recipient	You should complete form 956A Appointment or withdrawal of an authorised recipient
	OR	
	Migration agent	
	OR	Your migration agent/legal practitioner/
	Legal practitioner	exempt person should complete form 956 Appointment of a registered migration agent, legal practitioner or exempt person
	OR	regal praeditioner of exempt person
	Exempt person	
	Part I – Payme	ent 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	receip	t nu	mber	from	the	'Му	Paym	nents'	secti	on of	f ImmiAccour	ıt
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Provide a	а сору	of y	our pi	rintea	rec	eipt						

Part J – Declaration

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

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 main appl					
	Date	Day	Month	Year	
Signature applicant 2					
	Date	Day	Month	Year	
Signature applicant					
	Date	Day	Month	Year	
Signature applicant					
	Date	Day	Month	Year	
Signature applicant					
	Date	Day	Month	Year	
Signature applicant (
	Date	Day	Month	Year	

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