## START HERE - Please Type or Print

START HERE - Please Type or Print				FOR INS USE ONLY		
Part 1. Information about you.				Returned	Receipt	
Family Name	Given Name		Middle Initial	 Resubmitted		
Address - C/O			<b>I</b>			
Street Number and Name			Apt. #	Reloc Sent		
City	State or Province			Reloc Rec'd		
Country	· · · · · · · · · · · · · · · · · · ·	ZIP/ Coc	/Postal de	_		
Date of Birth (Mo/Day/Yr)	Country of Birth			Applicant		
Social Security #	A #			Remarks/Action		
Conditional residence expires on (Mo/Day/Yr)						
Mailing address if different from residence in C/O						
Street Number and Name			Apt. #			
City	State or Province					
Country		ZIP/ Cod	/Postal le	Attorney or	To Be Completed by Attorney or Representative, if any Fill in box if G-28 is attached to represent	
Since becoming a conditional permanent resid indicted, convicted, fined or imprisoned for bre traffic regulations), or committed any crime for w	aking or violating a	any law or		the applicant		
	•	inesteu :		-	- #	
Part 2. Basis for petition. (Ch	eck one)			ATTY State License	e #	

a. . My conditional permanent residence is based on an investment in a commercial enterprise in a targeted employment area for which the required amount of capital invested has been adjusted downward.

b. 🗌 My conditional permanent residence is based on an investment in a commercial enterprise in an area for which the required amount of capital invested has been adjusted upward.

C. My conditional permanent residence is based on an investment in a commercial enterprise which is not in either a targeted area or in an upward adjustment area.

d. 🗌 I am a conditional permanent resident spouse or child of an entrepreneur, and I am unable to be included in a Petition by Entrepreneur to Remove Conditions (Form I-829) filed by my conditional resident spouse or parent.

e.  $\Box$  I am a conditional permanent resident spouse or child of an entrepreneur who is deceased.

## Part 3. Information about your spouse or children. (List all your children. Attach another sheet if necessary.)

Name	Date of Birth (Mo/Day/Yr)	If in U.S., give A#, current immigration status and U.S. Address		

## Part 4. Information about your commercial enterprise.

Name of commercial enterprise in which you have invested:					
Street Address			City or Town		
State	ZIP/Postal Code	Business Telephone #		IRS Tax #	

## Part 4. Continued.

Type of enterprise (Check one):					
New commercial enterpri		of a new business. zation of an existing business. estment in an existing business.			
Kind of Business (Be as specific as possib	le.)				
Date Business Established (Mo/Day/Yr)	Amount of Initial Investment				
List number of full-time employees in enterpr At the time of your initial investment How many of these new jobs were created by		ouse, sons and daughters):Presently	Diffe	erence	
Subsequent investment in the Enterprise					
Date of Investment	Amount of Invest	ment	Type of Investment		
Please provide the gross and net income ger to date during the present year.	nerated annually by the comm	nercial enterprise since your initia	al investment. Include all inc	come generated up	
Year	G	Gross Income		Net Income	
Has your commercial enterprise filed for ban occurred since the date of your initial investm			its business organization or n on separate sheet)	r ownership	
Has your commercial enterprise sold any corp		y, or had any capital withdrawn	,	· · ·	
Part 5. Signature. (Read the info	rmation on penalties in the in		· /		
I certify, under penalty of perjury under the la I further certify that the investment was made immigration laws. I also authorize the releas eligibility for the benefit being sought.	e in accordance with the laws	of the United States and was no	ot for the purpose of evading	g United States	
Signature of Applicant		Print Name		Date	
Please note: If you do not completely fil eligible for the requested benefit, and this per		it any required documents listed	l in the instructions, you can	not be found	
Part 6. Signature of person	preparing form if	f other than above.			
I declare that I prepared this petition at the re	quest of the above person an	d it is based on all information o	f which I have knowledge.		
Signature		Print Name			