

### **EB-5 Investor Suitability Questionnaire**

-PERSONAL & CONFIDENTIAL-

#### PART 1 - PRIMARY APPLICANT INFORMATION: 1. Applicant/Investor Name: 2. Full Name in Native Alphabet: 3. Gender: □ Male □ Female □ Single, □ Married □Widowed □Divorced 4. Marital Status: never married 5. Date of Birth: (month/day/year) Place of Birth: (city and country) 6. Country of Citizenship: 7. Home Phone Number: 8. (country code/area code/number) Mobile Phone Number: 9. (country code/area code/number) 10. **Email Address:** 11. Passport Issued by (Country): 12. Passport Number: 13. Passport Issued (date): Passport Expiry: 14. PART 2 - PRESENT RESIDENCE AND ADDRESS: **Street Address** City State/Province Postal/Zip Code Country



### **EB-5 Investor Suitability Questionnaire**

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	PARI 3 – INF	ORMATION AB	SOUT YOUR SPOUSE:
1.	Full Legal Name:		
2.	Full Name in Native Alphabet:		
3.	Gender:	□ Male	□ Female
4.	Maiden Name:		
5.	Date of Birth: (month/day/year)		
6.	Place of Birth: (city and country)		
7.	Country of Citizenship:		
	PART 4 – INFORMATION AB	OUT YOUR CH	ILDREN (UNDER 21 YEARS OF AGE):
	Please use separate page if needed:		
1.	Full Legal Name:		
2.	Full Name in Native Alphabet:		
3.	Gender:	□ Male	□ Female
4.	Date of Birth:		
5.	Place of Birth: (city and country)		
6	Country of Citizenship:		
	PART !	5 – CURRENT E	MPLOYMENT:
1.	Employer (name of business/company):		
2.	Business Address:		
	City:	State/Province	): :
	Country:	Postal/Zip Cod	е
3.	Job Position:		
4.	Start Date:		
5.	Annual Salary:		
6.	Other Compensation:		

### PART 6 – GENERAL INFORMATION:



1.	Have you or your spouse ever filed for Banl If yes, please use separate page to explain.	kruptcy?	□ Yes	□ No
2.	Have you or your spouse ever been convict If yes, please use separate page to explain.	ed of a crime?	□ Yes	□ No
3.	How well do you speak English?	☐ Need Translation ☐ Conversationa	l 🗆 Fluent	
4.	Anticipated date of your I-526 Petition sub	mission:	(month/d	day/year)
	PART 7 – APPLICA	NTS LIVING IN THE UNITED STATES:		
1.	U.S. Address (Street # and Name)			
	City:	State/Province:		
	Country:	Postal/Zip Code		
2.	Date of Arrival			
3.	I-94 # (arrival and departure record)—atto	ach copy		
4.	I-94 Expiry Date (month/day/year)			
5.	I-94 Issuance Date (month/day/year)			
6.	Current Non-immigrant status			
7.	Expires on (month/day/year)			
8.	Date of Last Entry into U.S.	-		
9.	Place of Last Entry into U.S.	<del></del>		
10.	Social Security Number (if any)			
11.	Alien Number (if any)			
	PART 8 – GENE	RAL IMMIGRATION QUESTIONS:		
1.	Are you currently a green card holder?		□ Yes	□ No
		If YES, when does it expire	?	
2.	Have you obtained a U.S. Visa before?		□ Yes	□ No
		If YES, what type of visa		
		If YES, when was your last date of entry		¬ No
3.	Have you ever stayed in the U.S. beyond au If YES, please explain the circumstances?	ıthorization?	□ Yes	□ No
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4.	Have you previously applied for a U.S. Immigrant or Non-Immigrant Visa and been denied?  If YES, please provide details why application was denied.	□ Yes	□ No
5.	Are there any children listed on the preliminary questionnaire that will turn 21 years of age within the next year? If YES, please provide name and date of birth of child.	□ Yes	□ No
6.	Is there other relevant information regarding your current immigration that we shoul any of your family members?	d be aware	of for you or
	PART 9 – U.S. ADMISSABILITY VERIFICATION:		
THI CO EXC TO DO	ATES. THE EXCLUDABLE CLASSES ARE DESCRIBED BELOW IN GENERAL TERMS. YOU SHE FOLLOWING LIST AND ANSWER YES OR NO TO EACH CATEGORY. THE ANSWERS YOU INSULAR OFFICER TO REACH A DECISION ON YOUR ELIGIBILITY TO RECEIVE A VISA.  CEPT AS OTHERWISE PROVIDED BY LAW, ALIENS WITHIN THE FOLLOWING CLASSIFICATE RECIEVE A VISA.  I ANY OF THE FOLLOWING CLASSES APPLY TO YOU?	J GIVE WIL	L ASSIST THE
<b>(Ch</b> 1. 2.	An alien who has a communicable disease of public health significance; who has failed to present documentation of having received vaccinations in accordance with U.S. law; who has or has had a physical or mental disorder that poses or is likely to pose a threat to the safety or welfare of the alien or others; or who is a drug abuser or addict.  An alien convicted of, or who admits having committed, a crime involving moral	□ Yes	□ No
	turpitude or violation of any law relating to a controlled substance or who is the spouse, son, daughter of such trafficker who knowingly has benefited from the trafficking activities in the past five years; who has been convicted of 2 of more offenses for which the aggregate sentences were 5 years or more; who is coming to the United States to engage in prostitution or commercialized vice or controlled substance; who has committed a serious criminal offense in the United States and who has asserted immunity from prosecution; who, while serving as a foreign government official and within the previous 24-month period, was responsible for or directly carried out particularly severe violations of religious freedom; or whom the President has identified as a person who plays a significant role in severe form of trafficking in person, who otherwise has knowingly aided, abetted, assisted or	□ Yes	□ No

the trafficking activities within the past five years.



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3.	An alien who seeks to enter the United States to engage in espionage, sabotage, export control violations, terrorist activities, overthrow of the Government of the United States or other unlawful activity; who is a member of or affiliated with the Communist or other totalitarian party; who participated in Nazi persecutions or genocide; or who has engaged in genocide. Are you a member or representative of a terrorist organization as currently designated by the U.S. Secretary of States?	□ Yes	□ No
4.	An alien who is likely to become a public charge?	□ Yes	□ No
5.	An alien who seeks to enter for the purpose of performing skilled or unskilled labor who has not been certified by the Secretary of Labor; who is a graduate of a foreign medical school seeking to perform medical services who has not passed the NBME exam or its equivalent; or a health care worker seeking to perform such work without a certificate from the CGFNS or from an equivalent approved independent credentialing organization.	□ Yes	□ No
6.	An alien who failed to attend a hearing on deportation or inadmissibility within the last 5 years; who seeks or has sought a visa, entry into the United States, or any immigration benefit by fraud or misrepresentation; who knowingly assisted any other alien to enter or try to enter the United States in violation of law; who, after November 30, 1996, attended on student (F) visa status a U.S. public elementary school or who attended a U.S. public secondary school without reimbursing the school; or who is subject to a civil penalty under INA 274C.	□ Yes	□ No
7.	An alien who is permanently ineligible to U.S. citizenship; or who departed the United States to evade military service in time of war.	□ Yes	□ No
8.	An alien who was previously ordered removed within 5 years or ordered removed a second time within the last 20 years; who was previously unlawfully present and ordered removed within 10 years or ordered removed a second time within the last 20 years; who was convicted of an aggravated felony and ordered removed; who was previously unlawfully present in the United States for more than 180 days but less than one year who voluntarily departed within the last 3 years; or who was unlawfully present for more than one year or an aggregate of one year within the last 10 years.	□ Yes	□ No
9.	An alien who is coming to the United States to practice polygamy; who withholds custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court or intentionally assists another person to do so; who has voted in the United States in violation of any law or regulation; or who renounced U.S. citizenship to avoid taxation.	□ Yes	□ No
10.	An alien who is a former exchange visitor who has not fulfilled the 2-year foreign residence requirement.	□ Yes	□ No
11.	An alien determined by the Attorney General to have knowingly made a frivolous application for asylum.		
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12.	An alien who has ordered, carried out or materially assisted in extrajudicial and political killings and other acts of violence against the Haitian people; who has directly or indirectly assisted or supported any of the groups in Colombia known as FARC, ELN, or AUC; who through abuse of a governmental or political position has converted for personal gain, confiscated or expropriated property in Cuba, a claim to which is owned by a national of the United States, has trafficked in such property or has been complicit in such conversion, has committed similar acts in another country, or is the spouse, minor child or agent of an alien who has committed such acts; who has been directly involved in the establishment or enforcement of population controls forcing a woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free choice; or who has disclosed or trafficked in confidential U.S. business information obtained in connection with U.S. participation in the Chemical	□ Yes	□ No
	Weapons Convention or is the spouse, minor child or agent of such a person.		
13.	Have you ever been charged, arrested or convicted of any offense or crime?	□ Yes	□ No
14.	Have you ever been refused admission to the United States at a port-of-entry?	□ Yes	□ No
15.	Have you ever applied for a Social Security Number (SSN)?	□ Yes	□ No
16.	Do you want the Social Security Administration to assign you an SSN (and issue a card) or issue you a new card (if you have an SSN)?	□ Yes	□ No
17.	CONSENT TO DISCLOSURE: I authorize disclosure of information from this form to the Department of Homeland Security (DHS), the Social Security Administration (SSA), such other U.S. Government agencies as may be required for the purpose of assigning me an SSN and issuing me a Social Security card, and I authorize the SSA to share my SSN with the USCIS. The Applicant's response does not limit or restrict the Government's ability to obtain his or her SSN, or other information on this form, for enforcement or other purposes as authorized by law. You must answer YES to this question in order to receive as SSN and/or card.	□ Yes	□ No
18.	<b>ACKNOWLEDGEMENT:</b> I acknowledge and agree to provide detailed information concerning my assets and the manner in which I obtained my assets, including information regarding all bank account balances, investments, business income, real estate assets, inheritances, gifts, loans and other assets. I understand that failure to provide this information will prevent me from qualifying under the EB-5 Program.	□ Yes	□ No



	PART 10 – ADDITIONAL INFORMATION REQUESTED:		
1.	Have you retained an immigration attorney? If YES, please provide name and contact information for our files:	□ Yes	□ No
	If NO, do you need a referral?	□ Yes	□ No
2.	How did you hear about the Florida Overseas Investment Center?		
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3.	Were you referred to us by someone? If YES, please provide name and contact information for our files.	□ Yes	□ No
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	PART 11 – FINANCIAL CONDITION:  Determination of Accredited Investor Status		
THE	UNDERSIGNED IS AN ACCREDITED INVESTOR BY REASON OF AT LEAST ONE OF THE FOLLOWING	:	
CHEC	CK ALL OF THE FOLLOWING THAT APPLY TO YOU		
(Che	ck the yes/no box that applies to your for each question)		
1.	My net worth (either individually or with my spouse, if any) is at least US \$1,000,000. For this purpose, "net worth" means the amount by which the fair market value of my total assets (excluding my principal residence) exceeds my total liabilities.	□ Yes	□ No
2.	My individual annual income was at least US \$200,000 in each of the two most recent years, and I expect such income in the current year. For this purpose, "individual annual income" means my gross income less any income attributed to my spouse or to property owned by my spouse.	□ Yes	□ No
3.	My annual income, jointly with my spouse, was at least US \$300,000 in each of the two most recent years, and I expect such income in the current year.	□ Yes	□ No
	PART 12 – VERIFICATION:		
PLEASE SUPPLY COPIES, VIA FAX OR EMAIL, OF YOUR PASSPORT AND ONE OF THE FOLLOWING:  1. □ Credit card 2. □ Student identification card 3. □ Workplace identification card 4. □ Valid Government issued driver's license including photograph In addition, if you are inside the United States, please provide copies of your current U.S. Visa and your I-94 Card.  THE INFORMATION ABOVE IS ACCURACTE AND HAS BEEN COMPLETED TO THE BEST OF MY ABILITY.			
	SIGNATURE OF APPLICANT DATE		



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#### ADDENDUM:

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