## ANNEX 29

## REQUEST FOR CONSENT TO EXTEND THE TERRITORIAL VALIDITY OF A LTV



The requesting Member State intends to issue a visa with limited territorial validity in accordance with Art. 25 (2) second sentence of Regulation (EC) 810/2009 to the applicant below and is hereby asking for the approval of the consenting Member State(s) to extend the territorial validity of the LTV to its territory.

## **Requesting Member State:**

Date		Place			
Authority		Responsible Officer			
Tel.		Fax			
E-mail		Signature (if applicable)			
Requested Member State(s):					
1.		2.			
Information on the visa applicant:					
1. Surname (family name)					
2. Surname at birth (former surname(s))					
3. First name(s) (Given name(s))					
4. Date of birth (dd-mm-yy)	5. Place of birth		7. Current nationality		
	6. Country of birth		Nationality at birth (if different from above)		
8. Sex	9. Marital status single married separated divorced widowed other (please specify)				
10. For minors: Surname, given names, address (if different from that of applicant) and nationality of person holding legal custody/legal guardian					

11. Type of travel document						
	☐ Passport ☐ Diplomatic passport ☐ Service passport ☐ Official passport ☐ Special					
passport Other travel document (please specify)						
12 Traval do aumant number	12 Data of	igguarda (dd	14 Volid until (dd mm vy)			
12. Travel document number	mm-yy)	issuance (uu-	14. Valid until (dd-mm-yy)			
15. Visa requested from (dd-mm-yy) to						
16. Purpose of the journey						
Information on the LTV to be issued:						
Reasons for the issuance						
☐ Humanitarian reasons ☐ National interest ☐ International obligation						
Other (please specify)						
This applicant does <b>not</b> meet the entry conditions specified in Article 5 (1) (a), (c), (d) (e) of Regulation (EC) No 562/2006						
Comments:						
Under the prior consultation in accordance with Article 22 of Regulation (EC) No 810/2009 a Member State has objected to the issuing of a uniform visa requested						
☐ The prior consultation in accordance with Article 22 of Regulation (EC) No 810/2009 has not been carried out for reasons of urgency						
Reasons for the request (please specify reasons for each requested Member State):						
To be filled out by the responsible authorities of the requested Member State						
The request to extend the territorial validity of the LTV to its territory has been						
☐ Approved		Reject	ed			
Comments (if relevant):						
Date		Place				
Date		1 lace				

Authority	Responsible Officer	
Tel.	Fax	
E-mail	Signature (if applicable)	

Please advise us of your decision as soon as possible by returning this completed form directly to the requesting authority.