



**EB-5 INVESTOR SUITABILITY EVALUATION  
PERSONAL & CONFIDENTIAL**

<b>PRIMARY APPLICANT INFORMATION:</b>			
APPLICANT / INVESTOR NAME:			
FULL NAME IN NATIVE ALPHABET:			
GENDER:    ___ MALE    ___ FEMALE		MARITAL STATUS: ___ SINGLE    ___ MARRIED ___ DIVORCED    ___ WIDOWED	
DATE OF BIRTH (month/day/year)	PLACE OF BIRTH (city/country)	COUNTRY OF CITIZENSHIP	
HOME PHONE NUMBER _____ (Country Code)    (Area Code)    (Number)			
MOBILE PHONE NUMBER _____ (Country Code)    (Area Code)    (Number)			
FAX NUMBER _____ (Country Code)    (Area Code)    (Number)			
EMAIL ADDRESS _____			
PASSPORT ISSUED BY (Country)	PASSPORT NUMBER	PASSPORT ISSUED (Date)	PASSPORT EXPIRY

<b>PRESENT RESIDENCE AND ADDRESS:</b>			
STREET ADDRESS			
CITY	STATE/PROVINCE	COUNTRY	POSTAL/ZIP CODE

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<b>INFORMATION ABOUT YOUR SPOUSE:</b>		
FULL LEGAL NAME		
FULL NAME IN NATIVE ALPHABET		
GENDER:     ___ MALE     ___ FEMALE		MAIDEN NAME (if applicable)
DATE OF BIRTH (month/day/year)	PLACE OF BIRTH (city/country)	COUNTRY OF CITIZENSHIP

<b>INFORMATION ABOUT YOUR CHILDREN (UNDER 21 YEARS OF AGE):</b>		
Please use separate page if needed.		
FULL LEGAL NAME:		
FULL NAME IN NATIVE ALPHABET:		
GENDER:     ___ MALE     ___ FEMALE		
DATE OF BIRTH (month/day/year)	PLACE OF BIRTH (city/country)	COUNTRY OF CITIZENSHIP

<b>CURRENT EMPLOYMENT</b>			
EMPLOYER (Name of business)		BUSINESS ADDRESS	
CITY	STATE/PROVINCE	COUNTRY	POSTAL/ZIP CODE
POSITION		START DATE	
ANNUAL SALARY		OTHER COMPENSATION	

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<b>GENERAL INFORMATION:</b>	
HAVE YOU OR YOUR SPOUSE EVER FILED FOR BANKRUPTCY? If yes, please use separate page to explain	_____ Yes      _____ No
HAVE YOU OR YOUR SPOUSE EVER BEEN CONVICTED OF A CRIME? If yes, please use separate page to explain	
HOW WELL DO YOU SPEAK ENGLISH?  _____ NEED TRANSLATION      _____ CONVERSATIONAL      _____ FLUENT	
ANTICIPATED DATE OF YOUR I-526 PETITION SUBMISSION: _____ Month / Day / Year	

<b>APPLICANTS LIVING IN THE UNITED STATES:</b>			
US ADDRESS (Street # and Name)			APARTMENT #
CITY /TOWN	STATE/PROVINCE	COUNTRY	POSTAL/ZIP CODE
DATE OF ARRIVAL: _____ Month / Day / Year		I-94 # : _____ (Arrival and Departure Record #)	
I-94 ISSUANCE DATE (attach copy):		I-94 EXPIRY DATE:	
CURRENT NON-IMMIGRANT STATUS: _____		EXPIRES ON: _____ Month / Day / Year	
DATE OF LAST ENTRY INTO US		PLACE OF LAST ENTRY INTO US	

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**GENERAL IMMIGRATION QUESTIONS:**

ARE YOU CURRENTLY A GREEN CARD HOLDER?       Yes       No

If YES, when does it expire? \_\_\_\_\_

HAVE YOU PREVIOUSLY HELD A U.S. TOURIST OR BUSINESS VISA (B1 or B2 Visa)?  
 Yes       No

If YES, what type of Visa? \_\_\_\_\_

If YES, when was your last Date of Entry? \_\_\_\_\_

HAVE YOU PREVIOUSLY APPLIED FOR A U.S. IMMIGRATION OR NON- IMMIGRATION VISA OR BEEN DENIED?       Yes       No

If YES, please provide details why application was denied? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ARE THERE ANY CHILDREN LISTED ON THE PRELIMINARY QUESTIONNAIRE THAT WILL TURN 21 YEARS OF AGE WITHIN THE NEXT YEAR?       Yes       No

If YES, please provide Name and Date of Birth of Child \_\_\_\_\_

IS THERE OTHER RELEVANT INFORMATION REGARDING YOUR CURRENT IMMIGRATION THAT WE SHOULD BE AWARE OF FOR YOU OR ANY MEMBER OF YOUR FAMILY?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**ADDITIONAL INFORMATION REQUESTED:**

HAVE YOU RETAINED AN IMMIGRATION ATTORNEY?     Yes         No

If YES, please provide the contact information for our files \_\_\_\_\_  
\_\_\_\_\_

If NO, do you need a referral?                     Yes         No

HOW DID YOU HEAR ABOUT THE NEW YORK CITY REGIONAL CENTER AND OUR PROJECTS?  
\_\_\_\_\_  
\_\_\_\_\_

WERE YOU REFERRED TO US BY SOMEONE?         Yes         No

If YES, please provide Name and contact information for our files \_\_\_\_\_  
\_\_\_\_\_

**PRIMARY APPLICANT'S NET WORTH:**

Please complete all sections below to the best of your ability so that we can evaluate the best funds to be used for immigration purposes. Also please note where the funds originated from under source of funds, i.e. checking account \$500,000 from sale of house; savings account \$200,000 income from business.

Qualifying investors in the US on a non-immigrant visa need to be accredited investors. An accredited investor is a term defined by various security laws that describes investors permitted to invest in certain types of higher risk investments, limited partnerships, hedge funds and angel investor networks. In the US an individual is considered to be an accredited investor if he or she has a net worth of at least US\$1 million or has made at least US\$200,000 each year for the last two years (US\$300,000 with spouse if married) and has the expectation to make the same amount in the current year.

**PLEASE PROVIDE INFORMATION FOR ASSETS TOTALING US \$1 MILLION MORE:**

LOCATION OR ASSETS:     UNITED STATES     ABROAD     BOTH

If Abroad, which Country (IES)? \_\_\_\_\_

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<b>ASSETS:</b>	<b>AMOUNT:</b>	<b>SOURCE OF FUNDS:</b>
CHECKING ACCOUNT	\$	
SAVINGS ACCOUNT	\$	
INVESTMENTS (Stocks, Bonds & Mutual Funds)	\$	
BUSINESS INCOME	\$	
REAL ESTATE	\$	
INHERITANCE	\$	
GIFT*	\$	
LOAN	\$	
OTHER (explain on separate sheet)	\$	

**TOTAL:** \$ \_\_\_\_\_

\* Please note, if an asset is a Gift, source of funds for the gift needs to be explained i.e. gift from parents of \$250,000, source of funds sale of parent's real estate.

<b>LIABILITIES:</b>	
MORTGAGE	
OTHER LOANS (Explain on separate sheet)	

**TOTAL:** \$ \_\_\_\_\_

**TOTAL NET WORTH** \$ \_\_\_\_\_

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**SOURCE OF FUNDS FOR INVESTMENT:**

\* Please use an additional sheet if needed.

PLEASE BE SPECIFIC AS POSSIBLE WHEN COMPLETING THE INFORMATION BELOW.

**OF THE ABOVE ASSETS, WHICH WILL CONTRIBUTE TO THE INVESTMENT?**

<b>ASSETS:</b>	<b>AMOUNT:</b>	<b>SOURCE OF FUND:</b>
	\$	
	\$	
	\$	
	\$	

**TOTAL INVESTMENT**            \$ \_\_\_\_\_

**VERIFICATION:**

Please supply copies, send via fax or email of the following for the Applicant / Investor and Spouse:

1. Valid government issued drivers license including photograph
2. Valid passport (copy of picture page)
3. National Identity card if available
4. Copy of current US visa (if inside the United States)
5. Copy of I-94 (if inside the United States)

The information above is accurate and has been completed to the best of my ability.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE (MM/DD/YY)