



REPUBLIC OF CYPRUS
MINISTRY OF INTERIOR



ASYLUM SERVICE
1077 NICOSIA

CHANGE OF ADDRESS

FILE No.	
ARC No.	
SURNAME	
NAME	
NATIONALITY	
NEW ADDRESS	_____
TOWN &	_____
POSTAL CODE	_____
TELEPHONE No.	

Please submit one of the following necessary documentation: (please ✓)

- Rental Agreement (certified by Notary / Certifying Officer or Community President)
- Electricity Authority Bill
- Water Board Bill
- Telephone Bill

APPLICANT'S SIGNATURE: _____

DATE: ____/____/____