



# Application for a Swedish residence permit for self-employed persons

The authority's notes	
File number	Signature

Use this form if you are from a non-EU/EEA country and wish to operate as a self-employed person in Sweden. The Swedish Migration Agency generally grants permits for two years. You only have the right to run your own business and you do not have the right to be employed elsewhere. Thereafter, you may be granted a permanent residence permit, provided that you are able to support yourself using the income from your business, that you adhere to generally accepted accounting principles and that you hold the permits required for the business. You must also have been a resident in Sweden for more than six months of each year.

If all of the information, requested in the form, has been provided, and if all necessary documents are included with the application, the waiting period will be shorter. Do not forget to sign the form.

More information can be found on our website, [www.migrationsverket.se](http://www.migrationsverket.se), under 'Working in Sweden > Starting your own business'.

- I am applying for a residence permit in order to operate as a self-employed person in Sweden (CF)
- I plan to be in Sweden for approx. .... days per year.
- I wish to take up permanent residence in Sweden.

### Personal details

Surname		Citizenship	
Forename(s)(all given names)		Citizenship at birth	
Date of birth (year, month, day, Swedish ID digits, if applicable)	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Are any of your relatives applying for a permit with you? <input type="checkbox"/> No <input type="checkbox"/> Yes (co-applicant must submit a separate application)	
Place of birth	Country of birth		
Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married* <input type="checkbox"/> Divorced <input type="checkbox"/> De facto spouse <input type="checkbox"/> Widow/widower			

\*Registered partners are considered to be married

### Passport details

You must hold a valid passport. You cannot be granted a temporary residence permit for a longer period than your passport is valid.

<input type="checkbox"/> National passport	<input type="checkbox"/> Other passport (state type) .....	Passport number	
Passport issued by	Date (yyyy-mm-dd)	Valid until (yyyy-mm-dd)	
Are your rights to return to your country of origin and/or the country of residence restricted? <input type="checkbox"/> No <input type="checkbox"/> Yes, country:	If yes, state validity dates (starting and ending)		
Do you also have a permit to live (stay) in another country? <input type="checkbox"/> No <input type="checkbox"/> Yes, country:	If yes, state validity dates (starting and ending)		



**Relatives in Sweden**

Name	Date of birth	Citizenship	Family relationship

**Future plans for the family**

Will your family (spouse, children) move to Sweden? <input type="checkbox"/> yes <input type="checkbox"/> no	If yes, when do you estimate that your family will move to Sweden?
If your family remains in your country of origin – how will they support themselves?	

**Your background**

You must show that you have significant experience in your field and previous experience of running your own business. You must also have documented knowledge of Swedish and/or English.

**Education** (feel free to use a separate sheet if the boxes are not sufficient)

State subject, educational level, name of institution and country	From	To

**Work experience and experience in your field of business** (feel free to use a separate sheet if the boxes are not sufficient)

Employer	Country	Time of employment From _____ To _____
Field	Occupation	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time .....%
Employer	Country	Time of employment From _____ To _____
Field	Occupation	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time .....%
Employer	Country	Time of employment From _____ To _____
Field	Occupation	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time .....%

**Previously owned businesses** (feel free to use a separate sheet if the boxes are not sufficient)

Name	Country	Time From	To
Field	Your share in the business (%)		
Name	Country	Time From	To
Field	Your share in the business (%)		
Name	Country	Time From	To
Field	Your share in the business (%)		
Who will run your business/businesses if you move to Sweden?			

**Language skills**

Describe how you have acquired your knowledge of English and/or Swedish

**Your business in Sweden**

You must show that you are running the business, that you have ultimate responsibility for it and that you own at least half of it. The business' services and/or goods must be sold and/or produced in Sweden.

Describe your business by answering the questions below. The plans must show that your business, following the two-year probationary period, will be able to support yourself and your family.

You must substantiate the information you provide by enclosing appropriate documents with your application.

**Information about your Swedish business**

Name of the business		Organization number (if your company is registered)
Are you starting a new business? <input type="checkbox"/> yes <input type="checkbox"/> no	How large a share (in %) in the business do/will you own?	What is your share of the cost of starting the business?
Are you buying an existing business? <input type="checkbox"/> yes <input type="checkbox"/> no	How large a share (in %) in the business do/will you own?	How much is your share of the cost of buying the business?
If you are or will be a partner, state your and the other partners' shares of the work and responsibility for the business.		
State the legal form that the business has/will have. <input type="checkbox"/> Trading partnership <input type="checkbox"/> Sole trader <input type="checkbox"/> Limited company <input type="checkbox"/> Limited partnership		

**Description of the business (business plan)**

In which field or area is your business active?	
Briefly describe the business' operations.	
What are your future plans for the business?	
Which products/services will your business provide?	
Who are the business' customers and where are they located?	
Who are your competitors?	
How do you plan to market your business?	
Who are your partners, either in Sweden or abroad?	
Who are the business' suppliers?	
Describe the business' premises	
How many employees will you have?	Describe the employees' duties
Describe your duties	
What gross salary or cash withdrawal do you estimate that you will be able to take out of the business? State the amount in Swedish kronor (SEK).	
First year ..... SEK/year	Second year ..... SEK/year

## Capital requirements and financing

State the capital required to buy the business or enterprise and to start operations.  
State all amounts in Swedish kronor (SEK) including value added tax (VAT).

### Capital requirements for the business/enterprise

Buying the business/enterprise	
Marketing	
Stock of goods	
Financial buffer	
Other	
Amount (SEK)	

### Your share of the financing

Own funds	
Loans	
Amount (SEK)	

### Financing by other partners

Own funds	
Loans	
Amount (SEK)	

### Other information concerning capital requirements and financing.

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## Budget for the first two years

Give an account of the planned revenue and costs for the company over the first two years.  
 State all amounts in Swedish kronor (SEK) excluding value added tax (VAT).  
 (The form automatically calculates the total amount. Write all costs with a minus sign (-) in front of the numbers. The numbers then turn red and the total amount under Estimated profit/loss will be correct.)

Revenue	Months 1-6	Year 1 total	Year 2
Sales within Sweden			
Sales within the EU			
Sales outside the EU			
Sum revenue (SEK)			

Costs (enter each cost with a minus sign (-) in front of the numbers)	Months 1-6	Year 1 total	Year 2
Cost of goods sold			
Costs for premises			
Employee salaries			
Employer contributions			
Administration/accounting			
Telephone and internet			
Office supplies			
Marketing			
Travel costs			
Insurance			
Other costs			
Interest costs			
Sum costs (SEK)			

Estimated profit/loss (revenue - costs =)	Months 1-6	Year 1 total	Year 2
Amount (SEK)			

### Basis for calculating the budget

Explain how you calculated the budget. Give an account of the quantity of goods/services you expect to sell and of how you will set your prices.

### Other information you wish to submit in support of your case

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### Documents to be included with the application

- Copies of your passport which show your identity, the passport's period of validity, entry and exit stamps and any residence permits for countries other than your country of origin.
- Receipt which shows that you have paid the application fee of SEK 2,000.
- Bank statements which show that you have sufficient funds to support you and your family during the first two years (equivalent to SEK 200,000 for you, SEK 100,000 for your spouse and SEK 50,000 for each accompanying child).
- Bank statements which show, if applicable, that you have sufficient funds to buy the business and to cover the estimated costs and investments necessary to run the business.
- Contract of sale if you have bought or intend to buy the business and/or enterprise.
- Partnership agreement or stock register
- Bank document which shows that you have paid the purchase sum or your part of the purchase sum, if you have bought the business and/or the enterprise.
- Contracts with customers/suppliers and for premises.
- Annual accounts/reports for the previous two years (if the business has been in operation earlier).
- Balance sheet and income statement (report) for the current financial year, up to and including the previous month.
- Course certificate or other evidence that you speak Swedish and/or English.
- Certificates to substantiate your educational background.
- Certificates from previous employers.
- Certificate of registration for companies you own or have owned abroad.
- Certificate of completed studies in Sweden.

*If you are permitted to study in Sweden, and if you remain in the country, you must show that you have completed at least 30 higher education credits or has completed a term of postgraduate education. In this case, you must apply for a permit before your student residence permit expires.*

### If you have received assistance with your business' accounting

Please provide the name and telephone number of the person who has helped you, for example, an accountant or auditor.

### Who filled in the form?

Provide the name and telephone number of the person who filled in the form, if you did not fill it in yourself.

### Decision to be sent to

State the embassy/consulate to which you would like the decision to be sent

### Applicant's signature

I hereby confirm that the information I have provided is correct.

Place and date

Signature (for children under the age of 18 – guardian's signature)

*Providing false information or deliberately withholding significant information in the application may result in a fine or imprisonment. See Chapter 20, section 6, paragraph 2 of the Aliens Act (2005:716).*