

FEE PAYMENT FORM - APPLICATION FOR PERMANENT RESIDENCE FEDERAL SKILLED WORKER CLASS

This form must accompany all applications for Permanent Residence under the **Federal Skilled Worker** class. A **separate** payment form is required for **each** application.

Please refer to step 3 of the Federal Skilled Worker instruction guide for acceptable methods of payment. Applications submitted with incorrect payments will be returned.

STEPS TO FOLLOW:

1. Calculate the applicable fee by referring to this table:

Processing Fee	Number of persons	Amount per person	Amount due \$ CAD
Principal applicant	1	x \$ 550	\$ 550
Each family member age 22 or older		x \$ 550	
Each family member under age 22 who is married or in a common-law relationship		x \$ 550	
Each family member under age 22 who is unmarried and not in a common-law relationship		x \$ 150	
		Total payment:	

- 2. Pay by certified cheque, bank draft or money order payable to THE RECEIVER GENERAL FOR CANADA or by Visa, Mastercard or American Express.
- Include the payment form and the documents specified in the Document Checklist (IMM 5612) with your application.

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4. Check the appropriate box to indicate your method of pa	ayment:			
Credit card (complete section A and B below)	Certified cheque, bank draft or money order (enclosed and complete section A below)			
SECTION A				
Name of principal applicant (given name(s), surname)	Name of payer (if different from the principal applicant)			
Address of payer (if different from the principal applicant)				
SECTION B - CREDIT CARD PAYMENT AUTHORIZATI	ION			
I agree to pay the Receiver General for Canada	(Please indicate the type of credit card with an "X") ☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS			
CAD\$ on my credit card for fees	WASTERGARD AWERIGAN EXTRESS			
related to an application for permanent residence.	Credit card number			
Name of cardholder (please print)	Expiry date of the card Month Year Mon			
Signature of cardholder	Note: The credit card must be valid for at least 6 months from the date of submission of your application. Otherwise your application will be returned.			
FOR OFFICIAL USE ONLY	Date Year Month Day			