**STANDARD FORM FOR NOTIFYING AND MOTIVATING REFUSAL, ANNULMENT OR REVOCATION OF A VISA**

 

REFUSAL/ANNULMENT/REVOCATION OF VISA

Ms/Mr ………………………………………………………………………………………………,

[ ]  The ……………………. embassy/consulate‑general/consulate/[other competent authority] in …………………………………….. [on behalf of (name of represented Member State)];

[ ]  [Other competent authority] of …………………………………………………………...…;

[ ]  The authorities responsible for checks on persons at ………………………………………..

has/have

[ ]  examined your application;

[ ]  examined your visa, number: ……………….., issued: ………………… [date/month/year].

[ ]  The visa has been refused [ ]  The visa has been annulled [ ]  The visa has been revoked

This decision is based on the following reason(s):

1. [ ]  a false/counterfeit/forged travel document was presented

2. [ ]  justification for the purpose and conditions of the intended stay was not provided

3. [ ]  you have not provided proof of sufficient means of subsistence, for the duration of the intended stay or for the return to the country of origin or residence, or for the transit to a third country into which you are certain to be admitted

4. [ ]  you have not provided proof that you are in a position to lawfully acquire sufficient means of subsistence, for the duration of the intended stay or for the return to the country of origin or residence, or for the transit to a third country into which you are certain to be admitted

5. [ ]  you have already stayed for 90 days during the current 180‑day period on the territory of the Member States on the basis of a uniform visa or a visa with limited territorial validity

6. [ ]  an alert has been issued in the Schengen Information System (SIS) for the purpose of refusing entry by ……………… (indication of Member State)

7. [ ]  one or more Member States consider you to be a threat to public policy or internal security

8. [ ]  one or more Member States consider you to be a threat to public health as defined in point (21) of Article 2 of Regulation (EU) No 2016/399 (Schengen Borders Code)

9. [ ]  one or more Member States consider you to be a threat to their international relations

10. [ ]  the information submitted regarding the justification for the purpose and conditions of the intended stay was not reliable

11. [ ]  there are reasonable doubts as to the reliability of the statements made as regards……. (please specify)

12. [ ]  there are reasonable doubts as to the reliability, as to the authenticity of the supporting documents submitted or as to the veracity of their contents

13. [ ]  there are reasonable doubts as to your intention to leave the territory of the Member States before the expiry of the visa

14. [ ]  sufficient proof that you have not been in a position to apply for a visa in advance, justifying application for a visa at the border, was not provided

15. [ ]  justification for the purpose and conditions of the intended airport transit was not provided

16 [ ]  you have not provided proof of possession of adequate and valid travel medical insurance

17. [ ]  revocation of the visa was requested by the visa holder**[[1]](#footnote-1)**.

**Additional remarks:**

Comments: You have the right to file a recourse against this decision before the Supreme Court of the Republic of Cyprus in accordance with Article 146 of the Constitution of the Republic of Cyprus within 75 days from the date of receipt of this notification.

Date and stamp of embassy/consulate‑general/consulate/of the authorities responsible for checks on persons/of other competent authorities:

Date and Stamp

………………………………………

Signature of person concerned……………………………………………………………..

1. Revocation of a visa based on this reason is not subject to the right of appeal. [↑](#footnote-ref-1)