



Authorisation Form for Foreign Domestic Worker Work Pass Transactions

This authorisation letter shall only be valid for 14 days from the date of employer's authorisation, and only applies to the application / renewal / transfer / cancellation of the foreign domestic worker(s) listed below. To ensure proper authorisation, employers are to indicate <u>NA</u> for rows that are not filled.

*The softcopy of this form contains macros and can only be used with MS Word 2007 version or later. Please print out the PDF version and fill it in hardcopy if you do not have the required software.

Dec	Declaration by Employer								
Employer Name		KANG CHUL MIN							
NRIC No./ FIN		S7470694J							
Contact No.		96553735/96504865							
Signa	ture and Date								
S/N	Name of Foreign	Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction					
1.	THEINT THIN ZAR	PAING	MC 339252	APPLY					
2.			1	= <u>8</u> 8					
I hereby declare that I am authorising <u>UNITED CHANNEL EMPLOYMENT AGENCY PTE LTD (07C4306)</u> (Name and licence no. of employment agency) to perform the above work pass transaction(s) on my behalf. Fill in only if applicable.									
I hereby declare that I am authorising(Full name as in NRIC/Passport)(NRIC/Passport No.), to submit this authorisation form on my behalf. A copy of the representative's NRIC/Passport is enclosed with this authorisation form.									
Declaration by EA									
⊘]	✓ I have spoken to and verified with employer to confirm his / her authorisation.								
Annager of the last	☑ I have spoken to and verified with employer that the person submitting this form to the EA is authorised to do so on behalf of the employer.								
"Scotland,"	and the second s								
4	✓ I declare that the information provided on this form is true and correct								
Nam	e of EA personnel	Helen Huang Yuling							
Regi	stration No.	R1658004							
Signa	ature and Date								

Ministry of Manpower Foreign Manpower Management Division

1500 Bendemeer Road Singapore 339946 Tel +65 6438 5122 Web http://www.mom.gov.sg Email mom_fmmd@mom.gov.sg

Underwritten by:





AVA INSURANCE AGENCY PTE LTD 91 Bencoolen Street #09-06 Sunshine Plaza Singapore 189652 Tel: +65 65356838 / 64638138 Fax: +65 65356828 / 64635021 Web: www.ava-ins.com.sg Company's Registration No. 201113230C

DOMESTIC MAID APPLICATION FORM

The Insurance Act: You are to disclose in the proposal form fully and faithfully all the facts which you know or ought to know in respect of the risk that is being proposed; otherwise the policy issued hereunder may be void.

est titlet www.mit.w// he	MPLOYER'S PARTICUL	ARS		B. MAID'S PARTICULARS	
Name of Proposer		Name of Maid			
Name of Proposer KANG CHUL MIN				THEINT THIN ZAR PAING	3
Address					T
19 GOLDHILL DRIV	VE SINGAPORE 308967	*Date of Birth (dd/mm/yyyy)	MC339252		
				15/12/1992	mc33pa
Nationality Singapore	SB Transmission Ref	Occupation		WP No Nationality 0 94 14 3535 MYANMAR	
Name of Company		NRIC/FIN No		The Period of Insurance (dd/mm/yyyy)	
Contact No:		S7470694J		From / /	To / /
(H) 96553735	(HP)	96504865			
PLAN A E. REIMBURSEME * YES Provided always that if my/our liability to keep shall only arise if the bre	/	DVERAGE: PLAN D ID TO INSURER: on for the waiver of control of the w	stipulated above ed by or resulted	*Age Limit: 69 years of age & I F. POLO GUARANTEE (F * \$2,000 \$7,0 FOR OFFICE USE ONLY	
I/we will only be liable G. TOP-UP FOR SE [] \$10,000 (A)		Singapore Ltd. a fixed NSES (Only with	2-Year Plan)	(Optional): \$30,000 (Annual Limit \$1	5,000)
disclosed to third pa ii) I declare and confin personal data and to	consent to TMIS collecting, using	ediaries, within or outs sent of the proposer/en or the above collection,	ide Singapore. oployer name here use, process and	conal data for the purpose of process oin, where applicable, and that he/sh disclosure; and oklomarine.com.sg.	
IMPORTANT NOTICE: The of fax or otherwise, shall the	ne Employer is hereby notified the	COUNTER-I at by virtue of signing the aforceable in a court of la	is Counter-Indemni	FORM ity Form, it is hereby understood and a he same legal effects as that of the or	greed that a copy of it, either by way iginal.
To: Tokio Marin	ne Insurance Singapore Lt n Street #09-01 Tokio Marine C	d.		And the second s	
20 McCallum	Street #09-01 Tokio Marine C	Jentre Singapore 005	040		
Door Sire					
Dear Sirs,	ITY FOR LETTER OF GUARAN	NTEE NO.			
RE: COUNTER-INDEMN	ITY FOR LETTER OF GUARAN	to provide as security,1	okio Marine Insur	rance Singapore Ltd. ("you") agrees	to my/our request to provide the
RE: COUNTER-INDEMN In lieu of the cash deposit following (whichever is se	t that I/we would otherwise have elected to be covered under the	to provide as security,1 insurance plan):			to my/our request to provide the
RE: COUNTER-INDEMN In lieu of the cash deposit following (whichever is se	t that I/we would otherwise have elected to be covered under the e for \$5,000 to the Ministry of M	to provide as security. I insurance plan): lanpower of Singapore	and/or Controller	of Immigration of Singapore; and/or	
RE: COUNTER-INDEMN In lieu of the cash deposit following (whichever is se	t that I/we would otherwise have elected to be covered under the e for \$5,000 to the Ministry of M or \$2,000 or \$7,000 (whichever	to provide as security, I insurance plan): fanpower of Singapore amount is indicated in	and/or Controller	of Immigration of Singapore; and/or	r Office in Singapore,
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RE: COUNTER-INDEMN In lieu of the cash deposit following (whichever is se A Letter of Guarantee An Insurance Bond fo which guarantee(s) the p In return, I/we agree and 1. I/We will, at all times, losses, liabilities, cos or which become pay 2. You will have absolutaken or made agait 3. I/We shall accept the of Guarantee and/or 4. This counter indemn Letter of Guarantee	It that I/we would otherwise have elected to be covered under the e for \$5,000 to the Ministry of M or \$2,000 or \$7,000 (whichever payment on demand of any sum of undertake as follows: I, unconditionally and Irrevocably its and expenses whatsoever (in yable by you under the Letter of ute discretion to compromise a anst you under the Letter of Gure e receipts, vouchers or any officially shall be a continuing demand.	to provide as security. Insurance plan): fanpower of Singapore: amount is indicated in n or sums not exceeding y guarantee to jointly and a sum of the security of the securit	and/or Controller the insurance bond go the amount state and severally compete expenses determinance Bond. emands, actions, ince Bond. ements made by you little to you. time have absoluting my/our liabiliting my/our liabiliting day of	of Immigration of Singapore; and/or and) to the Philippine Overseas Laboured in the Letter of Guarantee and/or ensate you for all claims, payments, ined on a solicitor or client basis) while suits, proceedings, losses and liabilities or obligations income all liabilities or obligations income discretion without giving any notice	r Office in Singapore, Insurance Bond issued. demands, actions, suits, proceeding th may be taken or made against you ities whatsoever which may be urred by you because of the Letter
RE: COUNTER-INDEMN In lieu of the cash deposit following (whichever is se A Letter of Guarantee An Insurance Bond fo which guarantee(s) the p In return, I/we agree and 1. I/We will, at all times, losses, liabilities, cos or which become pay 2. You will have absolutaken or made agait 3. I/We shall accept the of Guarantee and/or 4. This counter indemn Letter of Guarantee	that I/we would otherwise have elected to be covered under the e for \$5,000 to the Ministry of M or \$2,000 or \$7,000 (whichever payment on demand of any sum of undertake as follows: . unconditionally and irrevocably its and expenses whatsoever (in yable by you under the Letter of oute discretion to compromise a nest you under the Letter of Gut e receipts, youchers or any of the Insurance Bond as conclusive entity shall be a continuing demar and/or Insurance Bond without	to provide as security. Insurance plan): fanpower of Singapore: amount is indicated in n or sums not exceeding y guarantee to jointly and a sum of the security of the securit	and/or Controller the insurance bong the amount state and severally compet expenses determined Bond. emands, actions, noe Bond. rments made by yellity to you. time have absolutiring my/our liabilitims.	of Immigration of Singapore; and/or and) to the Philippine Overseas Laboured in the Letter of Guarantee and/or ensate you for all claims, payments, ined on a solicitor or client basis) while suits, proceedings, losses and liabilities or obligations income all liabilities or obligations income discretion without giving any notice	r Office in Singapore, Insurance Bond issued. Idemands, actions, suits, proceeding th may be taken or made against yo lities whatsoever which may be urred by you because of the Letter
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RE: COUNTER-INDEMN In lieu of the cash deposit following (whichever is se	It that I/we would otherwise have elected to be covered under the e for \$5,000 to the Ministry of M or \$2,000 or \$7,000 (whichever payment on demand of any sum of undertake as follows: I, unconditionally and Irrevocably its and expenses whatsoever (in yable by you under the Letter of ute discretion to compromise a anst you under the Letter of Guz e receipts, vouchers or any off Insurance Bond as conclusive entity shall be a continuing demandant of Insurance Bond without F. I/we have hereto subscribed m	to provide as security. Insurance plan): fampower of Singapore amount is indicated in n or sums not exceeding y guarantee to jointly and adding legal costs and Guarantee and/or Insurantee and/	and/or Controller the insurance bond gethe amount state and severally compete expenses determinance Bond emands, actions, ince Bond. The several sever	of Immigration of Singapore; and/or and) to the Philippine Overseas Laboured in the Letter of Guarantee and/or ensate you for all claims, payments, inned on a solicitor or client basis) whis suits, proceedings, losses and liabilities or obligations income and the indemnity.	r Office in Singapore, Insurance Bond issued. Idemands, actions, suits, proceeding th may be taken or made against yo lities whatsoever which may be urred by you because of the Letter
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Schedule A: Domestic Maid Insurance & Bond Package

Section	Coverage	Plan A	Plan B	Plan C	Plan D
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