

**Declaration by Employer** 



## 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.

Emplo	oyer Name	QUEK MIEW IM SYLVIA			
NRIC	No./ FIN	UCS-S0064077H	91.51		
Conta	ict No.	96393991		*	
Signa	ture and Date	M.M.			
S/N	Name of Foreign	Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction	
1.	HTET MOE KHAING		ME 363526	APPLY	
2.				V Sales V Sale	
I h	ereby declare that I a	m authorising <u>UNITED CHA</u> erform the above work pass tr	NNEL SERVICES PTE LTD (11C4954) ransaction(s) on my behalf.	(Name and licence no. of	
I hauthoris			e as in NRIC/Passport)(NRIC, tive's NRIC/Passport is enclosed with		
		conflied with applements	ium his / hav authorisation		
✓ I	have spoken to and of the employer.	nsured all necessary fields are	e person submitting this form to the E	No.	
✓ I	declare that the info	mation provided on this form	is true and correct	, 1	
Name of EA personnel Farahizah Binte Shariff					
Regis	stration No.	R1100472			
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



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.

	MPLOYER'S PARTICUL				B. MAID'S PARTICULARS	
Name of Proposer			Sex	1	Name of Maid	
QUEK MIEW IM SYL	VIA		■ M ¥	F	HTET MOE KHAING	
Address 89 LUCKY HEIGHTS	S SINGAPORE 467632				*Date of Birth (dd/mm/yyyy) 07 / 06 / [990]	Passport No ME 36 35 26
Nationality Singapore	SB Transmission Ref	Occupation			WP No	Nationality  Myanmar
Name of Company		NRIC/FIN No UCS-S0064077H	Ι		The Period of Insurance (dd/m	ım/yyyy)
Contact No: (H)	(HP)	96393991			From / / 1	To / /
PLAN A  E. REIMBURSEMEN  YES  Provided always that if my/our liability to keep T shall only arise if the breafrom any deliberate act of the Security Bond was not the Security Bond was not shall only arise if the security Bond was not shall only are s		PLAN D D TO INSURER:  m for the waiver of countries to the waiver of the waiter of the	stipulated abo ed by or result condition und act or omission	ly, ive ed er on,	*Age Limit: 69 years of age & 8 F. POLO GUARANTEE (F  * \$2,000 \$7,00  FOR OFFICE USE ONLY	
disclosed to third par ii) I declare and confirm personal data and to iii) I acknowledge the de	ty service providers, or interme that I have obtained the cons give consent on their behalf fo tailed Privacy Policy Statemen e Employer is hereby notified tha	ediaries, within or outsis sent of the proposer/em or the above collection, nt, governing the above COUNTER-II at by virtue of signing this	ide Singapore aployer name use, process a, posted at w NDEMNI is Counter-Inde	herein and d www.tol	n, where applicable, and that he/sh- disclosure; and kiomarine.com.sg.	sing/servicing my policy/claim and be e has authorized me to disclose their igreed that a copy of it, either by way riginal.
20 McCallum Dear Sirs,	e Insurance Singapore Ltc Street #09-01 Tokio Marine C TY FOR LETTER OF GUARAN	Centre Singapore 0690	)46			
ollowing (whichever is sel  A Letter of Guarantee  An Insurance Bond fo	for \$5,000 to the Ministry of M r \$2,000 or \$7,000 (whichever ayment on demand of any sum	insurance plan): lanpower of Singapore amount is indicated in t	and/or Contro the insurance	oller of	nce Singapore Ltd. ("you") agrees of Immigration of Singapore; and/or ) to the Philippine Overseas Labour I in the Letter of Guarantee and/or I	r Office in Singapore,
1. I/We will, at all times, losses, liabilities, cost or which become pay. 2. You will have absolutaken or made again. 3. I/We shall accept the of Guarantee and/or I. 4. This counter indemniteter of Guarantee and the counter of Guarantee and I/We shall accept the or Guarantee and I/We shall accept the or I/We shall accept the	unconditionally and irrevocably s and expenses whatsoever (in able by you under the Letter of it are discretion to compromise all st you under the Letter of Guarrecellots, vouchers or any oth neurance Bond as conclusive ety shall be a continuing deman and/or Insurance Bond without	aduding legal costs and Guarantee and/or Insur- II claims, payments, de arantee and/or Insuran- er evidence of all payre evidence of my/our liabil and and you may at any at discharging or impair	expenses del ance Bond. emands, actio ce Bond. ments made l lity to you.	by you solute ability	ed on a solicitor or client basis) which uits, proceedings, losses and liabilities or obligations inco	demands, actions, suits, proceedings ch may be taken or made against you lities whatsoever which may be urred by you because of the Letter e to me/us extend the validity of the

## Schedule A: Domestic Maid Insurance & Bond Package

Section	Coverage	Plan A	Plan B	Plan C	Plan D
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