

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.

Employer Name		LIM QIAOJING		
NRIC No./ FIN		UCS-S8204938Z		
Contact No.		+65 9745 4223 1 3 AUG 2019		
Signa	ture and Date	ML	137	400 2010
S/N	Name of Foreign	Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction
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2.		and the term of the same of the 1950 a	and the state of t	n I no Springer
☐ I hereby declare that I am authorising <u>UNITED CHANNEL SERVICES PTE LTD (11C4954)</u> (Name and licence no. of employment agency) to perform the above work pass transaction(s) on my behalf.				
Fill in Control I have authoris	only if applicable. ereby declare that I a	am authorising(Full name as in half. A copy of the representative's		
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