

Your application is successful.

The following employer's application for exemption of FDW EOP is approved. Please keep the documents as listed in the MOM Webpage for at least 3 months for MOM's verification.

Reference No.

EEOP-2019-04-08-7366

Employer's Name

GYOO AH CHOCK

Employer's Identification No.

S0454552D

Exemption Reason

Employer's spouse is/was an FDW employer

Exemption Date

08/04/2019

Status of Representative

TAN AH PONG (S0454668G) is/was a FDW Employer





Fill in the details of the sponsors (and/or their spouse) below and ask them to sign the declaration. Please also complete Part A of the application form. Note that the section "Sponsor Income Details" should be completed with the sponsor's income, not the employer's. MOM can only consider two incomes, but they can be any of the employer's children/grandchildren/siblings or their partners.

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Please also submit copies of these additional documents with this application:

- 1. The sponsors' NRIC
- 2. Supporting documents to prove their income

Sponsor income details
Please use 1 or 2 to tell us about the sponsor's income.
1. The sponsor's monthly income range:
2. The sponsors' combined monthly income range:
Have the sponsor(s) worked in Singapore for the last 2 years? (tick one): No
What income proof do the sponsor(s) want to provide? (tick one):
Notice of assessment (NOA)
Employer letter & CPF statements, overseas income tax, or any other documents to show that they can afford to maintain the helper
Allow MOM to verify the sponsor(s)' income with IRAS. Please provide us with:
Sponsor 1's Singapore Tax Reference No.: Society S
Sponsor 2's Singapore Tax Reference No.: ——





Declaration by sponsor(s)

I/We declare that:

- I/We are responsible for the upkeep, maintenance and well-being of the foreign domestic worker. 1.
- I/We remain responsible for this foreign domestic worker as long as we remain sponsor(s).
- If I/we apply for a new foreign domestic worker, MOM will take into consideration our existing responsibilities for the foreign domestic worker.

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I/We must pay the foreign domestic worker levy and all other employment related expenses on behalf of _ (Name of employer), for as long as we remain sponsor(s).

Name of sponsor 1

Tan Beng Guat
NRIC/Passport number of sponsor 1

S 0056742F

Signature of sponsor 1

Date (DD-MM-YYYY)

Name of sponsor 2

NRIC/Passport number of sponsor 2

Signature of sponsor 2





About sponsor one	
Relationship with the employer:	
Boughter	
Full name:	
7an Beng Guat	11
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	٦
Gender (tick one):	
Female Male	
Date of birth (dd/mm/yyyy):	
(3.1.1.1.1.954)	
NRIC (if any):	
(0056742F	
Nationality:	
SIPOVEOM	
Residential status (tick one):	
Singapore Citizen Permanent Resident	
Residential address:	
88 Corporation Road	
#13-18 5(649823)	
Postal Code 6.4.9.8.2	2
0,7,0,0	_
Marital status (tick one):	
Single Divorced Widowed Separated Married	t

根据被控制部分的数据,这一一一一工作证据的特别的证据,这个证明,也是这一点,这是不是这种的证明的证明,但这个证明,但这个一个人的证明,这种是有数据的特别的证明的





If sponsor 1 is married, please complete this section.					
Was the marriage registered in Singapore? (tick one):					
☐ Yes ☐ No					
Spouse's full name:					
YIK TZE KONG					
Spouse's gender (tick one): Female Male					
Spouse's date of birth (dd/mm/yyyy):					
Spouse's NRIC (if any): Spouse's FIN (if any):					
Passport no.: Passport expiry date (dd/mm/yyyyy):					
Spouse's nationality: Spouse's residential status (tick one): Singapore Citizen Permanent Resident Long-Term Visit Pass (LTVP) Employment or S Pass Dependant's Pass Others					
Sponsor 1's contact details Mobile no.: + 6 5 98 5 5 9 6 8 2 Email: OUAPI Of D gmail. Com					
Residential address: 88 Corporation Road House Stugges and					
# 13-18 \$ (649823)					
Postal Code 6,4,9,8,2,3					





About sponsor 2 (if any)
Relationship with the employer:
Full name:
Gender (tick one):
Female Male
Date of birth (dd/mm/yyyy):
NRIC (if any):
Nationality:
nationality.
Residential status (tick one):
Singapore Citizen Permanent Resident
Residential address:
Postal Code
Marital status (tick one):
Single Divorced Widowed Separated Married

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If sponsor 2 is married, please complete this section.						
Was the marriage registered in Singapore? (tick one):						
☐ Yes ☐ No						
Spouse's full name:						
Spouse's gender (tick one): ☐ Female ☐ Male						
Spouse's date of birth (dd/mm/yyyy):						
Spouse's NRIC (if any): Spouse's FIN (if any):						
Passport no.: Passport expiry date (dd/mm/yyyy):						
Spouse's nationality:						
Spouse's residential status (tick one):						
☐ Singapore Citizen ☐ Permanent Resident ☐ Long-Term Visit Pass (LTVP)						
Employment or S Pass Dependant's Pass Diplomat						
Others						
Sponsor 2's contact details						
Mobile no.:						
+ 6 5						
Email						
Residential address:						
Postal Code						

REPUBLIC OF SINGAPORE CERTIFICATE OF REGISTRATION OF DEATH

291698C

	Death registered at CHANGI GENERAL HOSPITAL. SINGAPORE							
	Full name of deceased TAN AH PONG							
DECEASED	NRIC/Identification Document No.	S0454668G	Sex MAL	E	Date of b	oirth	15/07/192	.6
	Race/Dialect Group CHINESE/HOKKIEN		Nationality SINGAPORE	CITIZEN	Country	Place of bi		APORE
	Home Address APT BLK 9 EUNOS CRESCENT #15-2695 SINGAPORE 400009				Date and	hour of de 10/03/20	ath 019 0140	
	Place or Address where death occurred CHANGI GENERAL HOSPITAL		,		App		nterval betw	een .
	CHAIGI OBABAB HOSI ITAE				Years	Months	Days	Hours
	I (a) PNEUMONIA, UN Disease or Condition leading to death	SPECIFIED					17	
	(b)							
ER	Antecedent Causes							
CAUSE OF DEATH BY CERTIFIER	(c)							
	II Other Significant conditions							
			*					
	5							
	Name and official status of person certifying caus DR VIVEK BALIRAM KALYANKAR, MEDIC						of Death D-2019-CW-	-001884
	Name TAN BENG CHUAN			I certify that the	above info	rmation giv	en by me is	correct.
INFORMANT	Address APT BLK 333 UBI AVENUE 1 #12-7 SINGAPORE 400333	761		4	in hour	10	(3/20	19
		47653A		Informant's Sign		••••	D	ate
Z	Relationship SON			Thumb impressi	on .			
REGISTRATION	,	ARINA BINTE ROSLAN TION OFFICER		for Registrar of B	OGCA irths and D	eaths		

OSITION	PERMIT TO BURY/CREMATE BODY [The Environment Public Health Act (Chapter 95)]				
DISPOSIT	Place of Burial or Place of Cremation MANDAI CREMATORIUM	Religious type CHRISTIAN			
INFORMANT MAKING APPLICATION	I TAN BENG CHUAN NRIC/Identification Document No \$1247653A apply for a permit to bury + Discremate + 291698C the deceased referred to in the Death Certificate No. For application to cremate only I certify that to the best of my knowledge, the deceased has no written direction that he/she should not be cremated +	Informant's Signature/ Thumb impression Lo[3 20 9 Date			
REGISTRATION OFFICER	The Certificate of Cause of Death certified that there is No evidence of pacemaker in the body of the deceased + Evidence of pacemaker/device removed from the body of the deceased + Permit is approved. 10.3.0019 Date	for Commissioner of Public Health			



Work Pass Division Ministry of Manpower 18 Havelock Road Singapore 059764

Telephone: (65) 64385122 Facsimile : (65) 65387275

Website : http://www.mom.gov.sg Email : mom_wpd@mom.gov.sg

The family of the late TAN AH PONG 9 EUNOS CRESCENT #15-2695 SINGAPORE 400009

Foreign Domestic Worker : MOE KYAE AUNG

WP No.

: 0 94460026

MATTERS CONCERNING THE LATE TAN AH PONG'S DOMESTIC WORKER

Dear Sir / Madam

We came to know of TAN AH PONG's demise and would like to express our sincere condolences.

We understand that this is a difficult time for your family. Unfortunately, we have to bring to your attention that with TAN AH PONG's demise, a decision will need to be made on the future of MOE KYAE AUNG.

if you wish to employ or transfer her, please get the prospective employer to

Download the FDW application form at www.mom.gov.sg

Submit the application form, the required documents, and a copy of the late employer's death certificate at any SingPost office within one month from the date of this letter.

(A \$30 fee applies for each application.)

\$35

Alternatively, you may choose to send her home by authorising an Employment agent to cancel her permit. Please remember to settle all outstanding salary with the worker before she leaves the country.

Important notes

Levy will be charged until the worker is transferred or sent home.

If no action is taken within one month from the date of this letter, we will cancel the work permit and you will then need to send the worker home within seven days.

Yours sincerely

amenu

Penny Han (Mrs)

Controller of Work Passes