



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 NA 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.

Declaration by E	nployer			
Employer Name	TAN UNA	7		
NRIC No./ FIN	58034613A			
Contact No.				
Signature and Date	more more	J		
S/N Name of Forei	gn Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction	
1				
2				
☐ I hereby declar	I hereby declare that I am authorising(Name and			
licence no. of e	mployment agency) to perf	orm the above work pass tran	saction(s) on my behalf.	
copy of the rep		t No.), to submit this authorisa		
Declaration by	EA			
☐ I have spoken	I have spoken to and verified with employer to confirm his / her authorisation.			
☐ I have spoker	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 empl	oyer.		
I declare that work pass tra		y fields are filled in prior to ma	king the abovementioned	
☐ I declare that	the information provided o	n this form is true and correct		
Name of EA perso	nnel			
Registration No.				
Signature and Dat	e			

Date:	
То:	
Work Permit Department	
Minstry Of Manpower	
18 Havelock Road	
Singapore 059764	
Dear Sir / Madam	
CONSENT TO TRANSFER FO	DREIGN DOMESTIC WORKER
FOREIGN DOMESTIC WORKER	
WORK PERMIT	
WORKTERWIT	
DATE OF APPLICATION	
Ι,	of NRIC / Passport No
(Name of Current Employer)	
Agree to release my Foreign Dome	estic Worker named above to the prospective employer
, ,	
(Name of Prospective Employer)	
Danding the cutour of the couling	tion to adoptate all responsibilities for the secondary section
	tion, I undertake all responsibilities for the employment
of the said Foreign Domestic Worke	er and will extend her work permit (if necessary).
If the application is not approved, I	will repatriate this worker.
NO X	
/ may an	
Sign of the Comment French	
Signature of Current Employer	