

Declaration by Employer

S7639032J

9834 9796

Employer Name

NRIC No./ FIN

Signature and Date

Contact No.



Authorisation Form for Foreign Domestic Worker Work Pass Transactions

ADRIAN NG SAY KHOON (ADRIAN HUANG SHIQING)

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>MA</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.

S/N	Name of Foreign I	Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction
1.	NWET NWET ZAW		MA968369	APPLY
2.			SHEL EMPLOYAGE	
		m authorising <u>UNITED CHANNEL</u> t agency) to perform the above w		
Fill in o	only if applicable.		TETTO	
		m authorising(Full name as in alf. A copy of the representative's		
Dec	laration by EA			
Ø 1	have spoken to and v	verified with employer to confirm h	is / her authorisation.	
1	have spoken to and word the employer.	verified with employer that the pers	son submitting this form to the	EA is authorised to do so on behalf
Normal	declare that I have e work pass transactions	nsured all necessary fields are filleds	d in prior to making the aboven	nentioned
4	declare that the infor	mation provided on this form is tru	ue and correct	
Nam	e of EA personnel	Helen Huang Yuling		
Regi	stration No.	R1658004		
Sign	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:



TOKIO MARINE INSURANCE SINGAPORE LTD. 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

TOKIOMARINE



AVA INSURANCE AGENCY PTE LTD 91 Bencoolen Streat #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.

. PROPOSER'S / E	MPLOYER'S PARTICUL	ARS		B. MAID'S PARTICULAR	
Name of Proposer	100 CONTROL OF THE STREET STRE		Sex	Name of Maid	
ADRIAN NG SAY KE	IOON (ADRIAN HUANG S	SHIQING)	☑ M ■F	NWET NWET ZAW	
Address					1
BLK 20 ANG MO KI	O AVENUE 2 #13-36 SING	APORE 567701		*Date of Birth (dd/mm/yyyy) / / 08/07/1980	Passport No
Nationality Singaporean	SB Transmission Ref	Occupation		WP No	Nationality
					MYANMAR
Name of Company		NRIC/FIN No		The Period of Insurance (do	l/mm/yyyy)
		S7639032J			T- / /
Contact No: H)	(HP)	9834 9796		From / /	To . / /
. PERIOD OF INS			tick one only	*Age Limit: 69 years of age	& below
* 1-YEAR			tick one only	F. POLO GUARANTEE	(For Filipino Helper only): ,000 (\$70.00)
	PLAN B PLAN C			100	
V. J.	NT OF INDEMNITY PA	1207	₹:	FOR OFFICE USE ONLY	
*-/	NO				
	I/we pay the additional premiu				
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	or omission of the Employer. V				
	to pay Tokio Marine Insurance			and the second s	
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		\$20,000 (Annual	Limit \$10.000)	\$30,000 (Annual Limit 5	\$15,000)
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Schedule A: Domestic Maid Insurance & Bond Package

Section	Coverage	Plan A	Plan B	Plan C	Plan D

Wo rker Details

WIP No. : 0 93551141

: NWET NWET ZAW Namme of Worker

DOB of Worker : 08/07/1980

Sex : FEMALE

Worker's FIN : G2587307L

Pa Ssport No. : MA968369

: MYANMAR Nationality

Employment History

Em ployer	Per	Industry		
	Start Date	End Date		
Em ployer 4	18/08/2017	03/03/2018	General Household	
Employer 3	22/02/2016	18/08/2017	General Household	
Employer 2	04/08/2015	22/02/2016	General Household	
Employer 1	22/01/2015	04/08/2015	General Household	

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Adrian As Say Khoon