



WORK PERMIT NUMBER

HELPER NAME

04 Feb 2020

0 27795587

DULAY MARY JANE MAHINAY

To be signed by the various parties and uploaded when you get the pass issued



TYPE OF APPLICATION
STANDARD APPLICATION

Part I. Helper and employment

About the helper

Full name DULAY MARY JANE

MAHINAY G8661545U

FIN **G8661545**U

Work permit number 0 27795587

Passport number EC5427576

Passport expiry date 21 Sep 2020

Immigration pass Not in Singapore

Nationality Filipino

Gender Female

Date of birth 05 May 1985

Birth place Philippines

Religion Christian

Ethnic group Filipino

8 years of formal education? Yes

Highest education level Secondary without spm

or gce o level

Marital status Single

Monthly salary \$620

Rest days per month 4

Fee paid to Employment 1240

Agency by the helper

About the employment

Employer's name

LOW CHIN KWEE

Place of employment

SHAMROCK PARK 5 NAMLY RISE Singapore 267113





WORK PERMIT NUMBER

HELPER NAME

04 Feb 2020

0 27795587

DULAY MARY JANE MAHINAY

Part I. Declaration by foreign domestic worker

I declare that:

- 1. I have read and understood the conditions of work permit, which are set out in the Employment of Foreign Manpower (Work Passes)
 Regulations c 91A, available at www.mom.gov.sg
- 2. I have had at least eight years of formal education and have the certificates to prove this. (This does not apply to you if you have been employed as a foreign domestic worker or confinement nanny in Singapore before.)

3. I have never been convicted of a criminal offence in any country or state.

- 4. For the purpose of assessing this application, I consent for the Government of Singapore and its statutory authorities to obtain from and verify information with any person, organisation or any other source, and to disclose such information to its authorised agents. For the purpose of my employment, I also consent for the Government of Singapore and its statutory authorities to display my employment information on the MOM's work pass systems, and to disclose such information to any relevant person or organisation.
- 5. I understand I have the option to set up a POSB bank account to receive my salary and get a free Centre for Domestic Employees (CDE) membership. If I choose to set up my POSB bank account and CDE membership, I confirm that I:
 - a. Have given my employer my written consent to submit my bank account application and any declarations to POSB
 - b. Have provided true and correct information to my employer for the bank account application
 - c. Allow the Ministry of Manpower to send my personal details to POSB and CDE
 - d. Allow CDE to use and store my personal details and contact me about my membership and participation in activities
- 6. I consent to the Ministry of Manpower displaying my work pass details when my work pass card is scanned using the Ministry of Manpower's work pass mobile application.
- 7. All the documents that have been submitted on my behalf in support of this Application for a Work Permit are true copies of the authentic documents.

Name of worker

DULAY MARY JANE MAHINAY

Signature of worker

Work permit number of worker

0 27795587

Date (DD-MM-YYYY)

17 FEB 2020





WORK PERMIT NUMBER

HELPER NAME

04 Feb 2020

0 27795587

DULAY MARY JANE MAHINAY

Part II. Prospective employer

About the employer

About the employer's spouse

Full name LOW CHIN KWEE

Gender Male

maro

02 Aug 1956

Nationality

Date of birth

Singapore citizen

Residential status

Singapore citizen

NRIC

SXXXX158F Married

Marital status
Housing type

Landed property

Full name NG BAN LOW

Gender Female

Date of birth 14 Feb 1956

Nationality Singapore citizen

Residential status Singapore citizen

NRIC SXX

SXXXX180B

Contact details

Mobile number

+65 96212190

Email

elvelyn@gmail.com

Residential address

SHAMROCK PARK 5 NAMLY RISE Singapore 267113

Employer's household details

Number of family members in the household (excluding employer and spouse): 6

Full name	ID number	ID type	Date of birth	Relationship
GOH SOO YEE	SXXXX786A	Nric	06 Nov 1983	Child In Law
LOW JEOK SUAN ANDREA	TXXXX734C	Birth Certificate	10 Aug 2015	Grandchild
LOW XIU LI ELVELYN(LIU XIULI ELVELYN)	SXXXX606F	Nric	24 Sep 1984	Child
LOW CHOK CHAUNG	SXXXX015E	Nric	14 Nov 1981	Child
LOW ZE RUEJOVIAL	TXXXX517F	Birth Certificate	29 Mar 2017	Grandchild
LOW ZE HYENG ZAVIER	TXXXX216D	Birth Certificate	18 Sep 2019	Grandchild





WORK PERMIT NUMBER

HELPER NAME

04 Feb 2020

0 27795587

DULAY MARY JANE MAHINAY

Part II. Declaration by employer

I declare that:

- 1. I do not have any medical condition(s) that will impair my ability to supervise and ensure the well-being of my foreign domestic worker.
- 2. I have read and understood the applicable conditions and regulatory conditions of work permit set out in the Employment of Foreign Manpower (Work Passes) Regulations ("EFMR"), available at www.mom.gov.sg.
- 3. I consent to the Government of Singapore and statutory authorities to obtain and verify information, including information relating to my medical condition, with any person, organisation or any other source, and retain such information for the purpose of assessing my suitability as an employer of foreign domestic worker(s). Further, I consent to the information obtained in this process to be released to the Government of Singapore, its statutory authorities and any authorised agents.
- 4. To the best of my knowledge, the foreign domestic worker (if she has not worked as a foreign domestic worker or confinement nanny in Singapore before) has had a minimum of eight years of formal education and has educational certificates as documentary proof of this.
- 5. I understand my foreign domestic worker has the option to set up a POSB bank account to receive her salary. If she chooses to set up her POSB bank account, I confirm that I:
 - a. Have obtained her written consent to submit her bank account application and any declarations to POSB
 - b. Have checked with her on the accuracy of her details for the bank account application
 - c. Allow the Ministry of Manpower to send my personal details and contact information to POSB
- 6. I have obtained written consent from the foreign domestic worker to perform this transaction. I will produce this consent when requested by the authority.
- 7. I consent to the Ministry of Manpower displaying work pass details when the foreign domestic worker's work pass card is scanned using the Ministry of Manpower's work pass mobile application.
- 8. I am not related to the foreign domestic worker.
- 9. I have ensured that the foreign domestic worker fully understands the contents of PART I and that it was signed by the foreign domestic worker.
- 10. The information in this application and any appeals I have made in relation to this application are, to the best of my knowledge, true and correct; and that all documents submitted in support of this application and any appeals made in relation to the application, are true copies of the authentic documents.
- 11. I am aware of and shall fulfil my obligations as an employer of a foreign domestic worker under the Employment of Foreign Manpower Act (Chapter 91A) ("EFMA") and EFMR which includes the following:
 - a. Pay her salary promptly
 - b. Pay for her upkeep and maintenance, including medical treatment
 - c. Provide acceptable accommodation for her
 - d. Should she die while in Singapore, pay for her burial or cremation and pay for her body and belongings to be returned to her home
 - e. Take her to the Controller of Work Passes when required by MOM
 - f. Inform the Controller of Work Passes in writing within seven days when her employment ends by cancelling her work permit
 - g. Arrange and pay for her passage home, after giving her reasonable notice and paying her outstanding salary
- 12. I shall take reasonable steps to ensure that my foreign domestic worker complies with the EFMA and the EFMR. Such steps shall include reporting to the Controller of Work Passes if I know that she is non-compliant.
- 13. I understand that if I breach any of my obligations as an employer of a foreign domestic worker, my Security Bond in the sum of \$5,000 which I have furnished to the Controller of Work Passes may be forfeited fully or in part. I also understand if there is only partial forfeiture, the Government of Singapore may forfeit the rest at a later point in time for the same breach or a different breach.
- 14. I also understand that if I breach any of my obligations as an employer of a foreign domestic worker, other enforcement actions may be taken against me in addition to my Security Bond being forfeited fully or in part.

Name of employer

NRIC/FIN

LOW CHIN KWEE

SXXXX158F

Signature of employer

Date (DD-MM-YYYY)

17 FEB 2020





WORK PERMIT NUMBER

HELPER NAME

04 Feb 2020

0 27795587

DULAY MARY JANE MAHINAY

Part III. Employment Agency

About the Employment Agency

Name

UNITED CHANNEL EMPLOYMENT AGENCY

PTE. LT

Licence no.

07C4306

Telephone

+65 63448807

Address

Part III. Declaration by Employment Agency

This declaration must be completed by the Employment Agency or intermediary who is making the application on behalf of the employer.

I declare that:

1. I am the Employment Agency personnel handling this application.

- 2. To the best of my knowledge, the foreign domestic worker (if she has not worked as a foreign domestic worker or confinement nanny in Singapore before) has had a minimum of eight years of formal education and has educational certificates as documentary proof of this.
- 3. I have obtained written consent from the employer and foreign domestic worker to perform this transaction. I will produce this consent when requested by the authority.
- 4. I have explained the contents of the application and the applicable conditions and regulatory conditions of this work permit, as set out in the Employment of Foreign Manpower (Work Passes) Regulations c 91A, to the foreign employee and the employer.
- 5. The information in this application and any appeals I have made in relation to this application are, to the best of my knowledge, true and correct; and that all documents submitted in support of this application and any appeals made in relation to the application, are true copies of the authentic documents.

Name of Employment Agency personnel

Employment Agency personnel number

Nang May Oo R1100684

May May Ob

Signature of Employment Agency personnel

Date (DD-MM-YYYY)

17 FEB 2020