



06 Nov 2018

WORK PERMIT NUMBER

0 09439269

HELPER NAME SITI PATUROH

To be signed by the various parties and uploaded as part of the issuance process



TYPE OF APPLICATION STANDARD APPLICATION

Part I. Helper and employment

About the helper

Full name SITI PATUROH

> FIN G8695557T

Work permit number

0 09439269 AU212964

Passport number Passport expiry date

19 Jul 2023

Immigration pass

Not in Singapore

Nationality

Indonesian

Gender

Female

Date of birth

18 Mar 1993

Birth place

Indonesia

Religion

Muslim

Ethnic group

Indonesian

8 years of formal education?

Yes

Highest education level

Secondary without spm

or gce o level

Married

Marital status

\$550

Monthly salary

Rest days per month

0

Fee paid to Employment

550

Agency by the helper

About the helper's spouse

About the employment

Name

Residential status

Not a Singapore Citizen or Permanent Resident

Employer's name

CHIA XUELING SHERLYN

Place of employment

117 DEVONSHIRE ROAD

#01-00

Singapore 239880





WORK PERMIT NUMBER

0 09439269

HELPER NAME SITI PATUROH

Part I. Declaration by foreign domestic worker

I declare that:

06 Nov 2018

- 1. I have read and understood the conditions of work permit, which are set out in the Employment of Foreign Manpower (Work Passes) Regulations
- 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
- 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

Name of worker

SITI PATUROH

Work permit number of worker

0 09439269

Signature of worker



Date (DD-MM-YYYY)

25 NOV 2018





WORK PERMIT NUMBER

06 Nov 2018 0 09439269 HELPER NAME SITI PATUROH

Part II. Prospective employer

About the employer

About the employer's spouse

CHIA XUELING SHERLYN Full name

Gender **Female**

Date of birth 09 Dec 1981

Nationality

Singapore citizen Singapore citizen

Residential status

S8137487B

Marital status

NRIC

Married

Housing type

Private flat / Apartment

ANG CHI SEN JASON Full name

Gender Male

Date of birth 09 Jan 1980

Nationality

Residential status

Singapore citizen Singapore citizen

NRIC

S8000099E

Contact details

Mobile number

+65 87814007

Email

chuasherlyn@gmail.com

Residential address

117 DEVONSHIRE ROAD

#01-00

Singapore 239880

Employer's household details

Number of family members in the household (excluding employer and spouse): 2

Full name	ID number	ID .		
	ib namber	ID type	Date of birth	Relationship
TAY GEOK ENG	S0053439J	Nric	27 Jun 1954	
EVAN ANG	T17100505		27 0411 1334	Mother In Law
- VIII AIVO	T1710250D	Birth Certificate	08 Apr 2017	Son





WORK PERMIT NUMBER

0 09439269

HELPER NAME SITI PATUROH

Part II. Declaration by employer

I declare that:

06 Nov 2018

- 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. In order for MOM to assess my application, I consent to the Government of Singapore and statutory authorities to getting from and verifying information with any person, organisation or any other source. Further, I consent to the information obtained in this process to be released to the Government of Singapore, its statutory authorities and their authorised agents.
- 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.
- 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
 - 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
- I consent to the Ministry of Manpower displaying work pass details when the foreign domestic worker's work pass card is scanned using the
- 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
- 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.
- 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

CHIA XUELING SHERLYN

NRIC/FIN

S8137487B

Signature of employer

Date (DD-MM-YYYY)

25 NOV 2018





06 Nov 2018

WORK PERMIT NUMBER

0 09439269

HELPER NAME

SITI PATUROH

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

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

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

Name of Employment Agency personnel

Nang May Oo B1100634

Employment Agency personnel number

Nang May Oo R1100634

Signature of Employment Agency personnel

Muy May

Date (DD-MM-YYYY)

25 NOV 2018