



WORK PERMIT NUMBER

HELPER NAME

07 Apr 2019

0 27826199

ISLA MENCHIE GONZALES

# 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 ISLA MENCHIE GO

**NZALES** 

FIN **G8681023P** 

Work permit number 0 27826199

Passport number EC5774757

Passport expiry date 22 Oct 2020

Immigration pass Not in Singapore

Nationality

Filipino

Gender Female

Date of birth 10 Sep 1986

Birth place Philippines

Religion Christian

Ethnic group Filipino

8 years of formal education? Yes

Highest education level Post secondary

Marital status Married

Monthly salary \$570

Rest days per month 4

Fee paid to Employment 570

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

SIA SOK HIA @ SIA LOKE

KIEW

Place of employment

23A POOLE ROAD Singapore 437511





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ISLA MENCHIE GONZALES

#### 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
- Loonsent 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.
- 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

Work permit number of worker

ISLA MENCHIE GONZALES

0 27826199

Signature of worker

Date (DD-MM-YYYY)

Marke

7 2 APR 2019





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**ISLA MENCHIE GONZALES** 

# Part II. Prospective employer

# About the employer

# About the employer's spouse

Full name SIA SOK HIA @ SIA LOKE Full name SIAW SIW CHING

KIEW Gender Female

Gender Male Date of birth 16 May 1946

Date of birth 10 Dec 1942 Singapore citizen

Nationality Singapore citizen

Residential status Singapore citizen Residential status Singapore citizen

NRIC **S1820143G** NRIC **S1845524B** 

Marital status Married

Housing type Landed property

# Income details

#### **Contact details**

Income used for application **Employer's income** Mobile number +65 96163355

Monthly income range \$12,500 - \$14,999 Email siahweemian@yahoo

Tax reference number S1820143G Residential address Singapore 437511





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ISLA MENCHIE GONZALES

#### 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. 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.
- 4. To the best of my knowledge, the foreign domestic worker (if she has not worked as a foreign domestic worker or confinement namy in Singapore before) has had a minimum of eight years of formal education and has educational certificates as documentary proof of this.
- 5. Lunderstand 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. Lunderstand 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.

7 46

Name of employer

NRIC/FIN

SIA SOK HIA @ SIA LOKE KIEW

S1820143G

Signature of employer

Date (DD-MM-YYYY)

2 2 APR 2019





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**ISLA MENCHIE GONZALES** 

### 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:

- ${\bf 1.}\ \ {\bf I}\ {\bf am}\ {\bf the}\ {\bf Employment}\ {\bf Agency}\ {\bf personnel}\ {\bf handling}\ {\bf this}\ {\bf application}.$
- 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 Palma Sharan Asuncion B1105865 Employment Agency personnel number
Palma Sharan Asuncion
R1105865

Signature of Employment Agency personnel

Date (DD-MM-YYYY)

7.2 APR 2019