



## 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 <u>NA</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.

| Declaration by Employer   |                          |                         |                        |  |
|---|--------------------------|-------------------------|------------------------|--|
| Employer Name   | Chea Yin chean           |                         |                        |  |
| NRIC No./ FIN   | 51736138C.<br>9238 600f. |                         |                        |  |
| Contact No.   | ntact No. 9238 6008.     |                         |                        |  |
| Signature and Date  |                          |                         |                        |  |
| S/N Name of Foreig  | n Domestic Worker(s)     | Passport / FIN / WP No. | Authorised Transaction |  |
|   | 9 THAZIN DO              | 0 93413113              | CKLWP                  |  |
| 2   |                          |                         |                        |  |
| I hereby declare that I am authorising (Name and  |                          |                         |                        |  |
| licence no. of employment agency) to perform the above work pass transaction(s) on my behalf.                               |                          |                         |                        |  |
| Fill in only if applicable.   |                          |                         |                        |  |
| I hereby authorise (Full name as in NRIC/Passport),   |                          |                         |                        |  |
| (NRIC/Passport No.), to submit this authorisation form on my behalf. A  |                          |                         |                        |  |
| copy of the representative's NRIC/Passport is enclosed with this authorisation form.  |                          |                         |                        |  |
| Declaration by EA   |                          |                         |                        |  |
| I have spoken to and verified with employer to confirm his / her authorisation.   |                          |                         |                        |  |
| 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 employer.  |                          |                         |                        |  |
| I declare that I have ensured all necessary fields are filled in prior to making the abovementioned work pass transactions. |                          |                         |                        |  |
| I declare that the information provided on this form is true and correct.   |                          |                         |                        |  |
| Name of EA personne   | el                       |                         |                        |  |
| Registration No.  |                          | *                       |                        |  |
| Signature and Date  | News 1                   | May Or                  |                        |  |





## \*\*\* ITINERARY RECEIPT - DUPLICATE \*\*\*

AGENCY/AIRLINE NAME

DATE OF ISSUE 21FEB18

MYANMAR TRVL 8M PSA OFFC SINGAPORE SG

RLOC 8M - HZMN2

NON-TRANSFERABLE

NAME: MAI/KHAINGTHAZINOO

E-TICKET NUMBER: 5992100203871

DATE FLIGHT

DEPARTURE AIRPORT

TIME ARRIVAL AIRPORT

CLASS BAG

L -OK 30K

23FEB 8M 232

SIN-SINGAPORE, SINGAPO 1345 RGN-YANGON, MYANMAR

TERMINAL 1

TERMINAL 1

ARRIVAL:1515

RESTRICTIONS: VLD ON 8M OPTD/FLT/DTE CHG FEES SGD100/NSPYTFFT/NONENO/R

RT/REF/FFP/

FORM OF PAYMENT: CASH

BASE FARE

IT SGD

TAX/FEE/CHARGE

SGD

AVIATION LEVY

SGD

80.80 6.100P

TICKET TOTAL

IT SGD

TAX/FEE/CHARGE ITEMIZATION

8.0000

19.90SG

4.30C7

6.60YQ

42.00YR

Notice: "Carriage and other services provided by the carrier are subject to conditions of carriage, which are hereby incorporated by reference. These conditions may be obtained from the issuing carrier."

- 1. The check in counter will be closed 40 minutes before standard departure time
- 2. The boarding gate will be closed 20 minutes before standard departure time
- 3. A single checked baggage weight may not exceed total 32kg
- 4. The Passenger shall not pack/place, fragile or perishable items, money, jewellery, or other valuables, business documents and other identification document or samples, in Checked Baggage
- 5. The dangerous goods must not be packed/placed/put in checked baggage or hand carry baggage
- 6. Be sure to remove sharp item/s and restricted items in hand-carry baggage and check liquid, gel and aerosol limits by authority
- 7. Economy passengers may bring one main item of carry-on baggage and one other small item, with a total combined weight of up to 7kg
- 8. If you bring too many carry-on baggage items or if they exceed the weight or size limits at the departure gate, staff will insist that the hand-carry baggage will be checked in. Charges may apply
- 9. The carrier is not liable for any damages or expenses, which the passenger incurred due to non-compliance with the stated obligations.
- 10. The carrier reserves the right to check all travel documents and formalities
- 11. The passenger shall obtain all the necessary documents and comply with all conditions requested by authorities (e.g. entry and exit conditions of the country).