



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 NA 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 | | Yong Pk Moi | |
| NRIC No. / FIN | | S 039 3389 Z | |
| Contact No. | | 9173 8203 | |
| Signature and Date | | | |
| S/N | Name of Foreign Domestic Worker(s) | Passport / FIN / WP No. | Authorised Transaction |
| 1 | Naw Eh Theng Hao | 0 9444 2848 | CXL |
| 2 | | | |
| <input checked="" type="checkbox"/> 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. | | | |
| <i>Fill in only if applicable.</i> | | | |
| <input type="checkbox"/> 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 | |
|--|--------------|
| <input checked="" type="checkbox"/> I have spoken to and verified with employer to confirm his / her authorisation. | |
| <input checked="" type="checkbox"/> 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. | |
| <input checked="" type="checkbox"/> I declare that I have ensured all necessary fields are filled in prior to making the abovementioned work pass transactions. | |
| <input type="checkbox"/> I declare that the information provided on this form is true and correct. | |
| Name of EA personnel | Yetty Simbar |
| Registration No. | R1112371 |
| Signature and Date | |



緬甸旅行社
MYANMAR TRAVELS AND TOURS PTE LTD
111, North Bridge Road #03-09, Peninsula Plaza, Singapore 179098
Tel: 6535 3870 (6 Lines) Fax: (65) 6534 0451
Email: myanmart@singnet.com.sg
Website: www.mttsingapore.com



INVOICE

To: UNITED CHANNEL EMPLOYMENT AGENCY PTE LTD
865, MOUNTBATTEN RD#02-45
KATONG SHOPPING CENTRE S437844
TEL: 63448807 FAX: 64470339
EMunitedcs@singnet.com/united@singnet.com

Invoice No. : INV0141714
Invoice Date : 01/02/19
Customer No. : MTT163
SO Reference : SO00172908
Cr.Term/DueDate : 0 DAYS/ 01/02/19
Page : 1 / 1
Issue Staff : SEINN

Attn : RAYMOND NG MR HP 63489411 HP982

| Description | Tkt/Voucher | Unit Fare | Tax | Qty | Amount |
|------------------------------------|--------------------------|-----------|------|-----|--------|
| 1. Air Ticket NAW/EHTHAYUHTOOMS | ADT 8M 599-2100217764 | 240.00 | 0.00 | 1 | 240.00 |

09FEB 8M 232 SIN-SINGAPORE, SINGAPO 1345 RGN-YANGON, MYANMAR G
-OK 30K
TERMINAL 1 TERMINAL 1 ARRIVAL:1515

Flight Itinerary :

Remark :

Total : SGD 240.00
Amount Received SGD (0.00)
Balance 240.00

Customer Acceptance



Authorized Stamp & Signature

Cheque/Bank Draft must be crossed and made payable to 'Myanmar Travels and Tours Pte Ltd'.



PASSPORT

Passport No

MD544888

MYANMAR

04 MAY 1995

Place of birth

NYAUNGLEBIN

Authority

31 AUG 2018

MOHA, YANGON

Date of expiry

Holder's signature

30 AUG 2023

QOW.

PVMMRNAW<EH<THAYU<HT00<<<<<<<<<<<<<<<<<<<
MD544888<6MMR9505047F2308308<<<<<<<<<<<<<4