



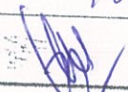
MINISTRY OF
MANPOWER

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	LAV LING ENG
NRIC No. / FIN	
Contact No.	9008 8004
Signature and Date	

S/N	Name of Foreign Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction
1	ANGELIN ANSARIO MAGDAONG	EC75-92687	CXL
2			

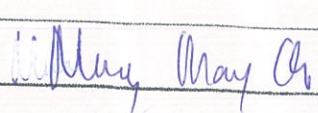
☒ I hereby declare that I am authorising _____ (Name and licence no. of employment agency) to perform the above work pass transaction(s) on my behalf.

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 personnel	May May Oo
Registration No.	F.I. 0684
Signature and Date	

Schedule of Salary and Loan (including loan for placement fee) Repayment

Name of Employer

LAU LING ENG

\$ 600

Name of FDW

ANGELIN ANSANIO MAGDAONG

Monthly Salary of FDW

\$ 692.00 Compensation : \$ 93.25 REIMBURSEMENT for 4 off days (\$23.25/day)

Total Amount of Loan (including loan for placement fee) \$ 1,218.00

S.No.	Schedule of salary Payment			Schedule of Loan (including loan for placement fee) Repayment			
	Month / Year	Date of Salary Payment	FDW acknowledgement (Signature)		Daye of Repayment	Employer's Acknowledgement (Signature)	FDW acknowledgement (Signature)
1	\$ 92.00	19-08-2017	208 + 92	\$600.00	19-08-2017	Advance \$500	Amagdaong
2	\$ 92.00	19-09-2017	208 + 92	\$600.00	19-09-2017	Allowance \$100	Amagdaong
3	\$ 674.00	19-10-2017	208 + 674 - 2 off days \$18.00		19-10-2017	Salary \$600	Amagdaong
4	\$ 692.00	19-11-2017				Salary \$600	Amagdaong
5	\$ 692.00	19-12-2017	balance \$236			Salary \$600	Amagdaong
6	\$ 692.00	19-01-2018	\$ 69.00 Amagdaong				
7	\$ 692.00	19-02-2018					
8	\$ 692.00	19-03-2018					
9	\$ 692.00	19-04-2018					
10	\$ 692.00	19-05-2018					
11	\$ 692.00	19-06-2018					
12	\$ 692.00	19-07-2018					
13	\$ 692.00	19-08-2018					
14	\$ 692.00	19-09-2018					
15	\$ 692.00	19-10-2018					
16	\$ 692.00	19-11-2018					
17	\$ 692.00	19-12-2018					
18	\$ 692.00	19-01-2019					
19	\$ 692.00	19-02-2019					
20	\$ 692.00	19-03-2019					
21	\$ 692.00	19-04-2019					
22	\$ 692.00	19-05-2019					
23	\$ 692.00	19-06-2019					
24	\$ 692.00	19-07-2019					
** Total Amount (S\$) :				\$1,218.00			

** The total amount should be filled in at the point of acknowledging this schedule, and it shall be the sum total of the monthly loan repayments.

** The monthly payment of \$692 is inclusive of the reimbursement of no off day based on mutual agreement. Employer is allowed to deduct \$23.25 for each off day given.

** Please indicate final salary for each month should there be any changes. Both employer and FDW shall sign on the amendments to prevent disagreement.

I hereby declare that and agree with the monthly salary and total amount of loan indicated above.

Amagdaong
Name / Signature of FDW

X
Name / Signature of Employer

Witnessed by EA Representative:

Name / Signature:

Lang ...
R1100684





United Channel

Cancellation Request (for other Country)

I, _____ of Passport no. _____
and Work Permit No. _____ hereby request to be sent to _____

(Place of Repatriation) Instead of my home country upon the cancellation of my work permit.

FDW's Signature: _____

Date: _____

Employer's Undertaking

I, _____ holder of Nric/Fin No. _____

Have no objection to the request of my Foreign Domestic Worker (FDW) named above to be
Sent to _____ instead of her home country and I hereby authorized
(Place of Repatriation)

☒ UNITED CHANNEL to cancel my FDW's work permit on _____ and she shall be
Repatriated within 14 days by flight/ferry/Coach No. _____ reporting to
Immigration _____ checkpoint. (Flight Number)

Employer's Signature: _____

Date: _____

EA Personnel Name Reg No. _____ Signature: _____

Date: _____

To:
Work Permit Department
Ministry Of Manpower
18 Havelock Road
Singapore 059764

Dear Sir / Madam

CONSENT TO TRANSFER FOREIGN DOMESTIC WORKER

☐ FOREIGN DOMESTIC WORKER

☐ WORK PERMIT

☐ DATE OF APPLICATION

I, _____ of NRIC / Passport No _____
(Name of Current Employer)

Agree to release my Foreign Domestic Worker named above to the prospective employer

(Name of Prospective Employer)

Pending the outcome of the application, I undertake all responsibilities for the employment of the said Foreign Domestic Worker and will extend her work permit (if necessary).

If the application is not approved, I will repatriate this worker.



Signature of Current Employer