

IMMIGRATION ACT
(CHAPTER 133)
IMMIGRATION REGULATIONS
SPECIAL PASS
REGULATION 15(3)

WP No. : 0 94382319
DOA : 28/06/2018
SB No. : DZA194317
SB EXPIRY : 28/08/2020
FIN : G8682277L

To : NYI YET NU



Nationality: MYANMAR Sex: Female Date of birth: 10/01/1989

G8682277LX

Your legal stay in Singapore has been extended to 04/09/2018, when you will need to leave the country.

TANG HIANG
25 JALAN ARIF
HENLEY GARDENS
SINGAPORE 548838
Tel No. : 96188161
EA Tel No. :

Special Pass Issue Date: 21/08/2018
Special Pass Expiry Date: 04/09/2018

CHOW CHOON YEN
for Controller Of
Immigration
Singapore

Note: Please surrender this pass to the Immigration Duty Officer's counter at the time of departure.



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	Tang Hianq		
NRIC No./ FIN	S15611196		
Contact No.	9618 8161		
Signature and Date	Ltm 21/08/18		

S/N	Name of Foreign Domestic Worker(s)	Passport / FIN / WP No	Authorised Transaction
1	Nyi Yet Nu	0 94382319	CR w/p
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		
Registration No.	Palma Sharon Asuncion R1105865	
Signature and Date	21/08/18	

WORK PASS DIVISION
APPLICATION FOR A WORK PERMIT FOR A DOMESTIC WORKER
PART IV - TO BE COMPLETED BY CURRENT EMPLOYER WHOSE
DOMESTIC WORKER IS APPLYING FOR A CHANGE OF EMPLOYER

To:
Work Pass Division
Ministry of Manpower
18 Havelock Road
Singapore 059764

Dear Sir / Madam

CONSENT TO TRANSFER DOMESTIC WORKER

FOREIGN WORKER : NYI yet NU
WORK PERMIT NO. : 0 94382319
DATE OF APPLICATION : _____

I, Tang Hiang of IC / Passport No. S15611194
(Name of Current Employer)

Agree to release my domestic worker named above to the prospective employer,

(Name of Prospective Employer)

Pending the outcome of the application, I undertake all the responsibilities for the employment of the said domestic worker and will extend her work permit (if necessary). If the application is not approved and I do not wish to continue her employment, I will repatriate this worker.

U Kh
SIGNATURE OF CURRENT EMPLOYER



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: _____