



A Home

Find an employer by NRIC or FIN

Sign out

You are acting on behalf of: NG HSAW HUI REINA (HUANG XUEWEI) NRIC: S8851234J

Cancel work permit NURMAHMUDAH - G2969636K

## You have cancelled NURMAHMUDAH's work permit

We have also emailed you this cancellation confirmation.

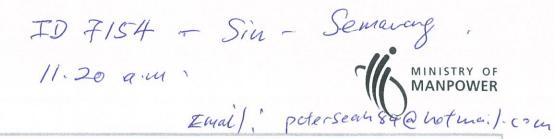
As soon as we confirm that the helper has left Singapore, we will tell the employer's insurance company to discharge the Security Bond.

## Remember

Levy will stop immediately but the employer will get one more levy bill for the days the helper worked for the employer this month. Please don't stop the GIRO arrangement just yet or make sure that the levy is paid through other means.

Return to employer's home page





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 Er	nployer			
Employer Name	NG HSAW HU	1 REINA		
NRIC No./ FIN	NG 45AW 11U 588512345			
Contact No.	ontact No. 91804812			
Signature and Date	ary ary			
S/N Name of Foreig	gn Domestic Worker(s)	Passport / FIN / WP No.	Authorised Transaction	
1 Nar h	Jahmudah	00 9072780	WP Cancellati	
I hereby declare that I am authorising (Name and				
	nployment agency) to perfor			
		(Full name a lo.), to submit this authorisa enclosed with this authoris	tion form on my behalf. A	
Declaration by E	A			
I have spoken t	I have spoken to and verified with employer to confirm his / her authorisation.			
	to and verified with employer		this form to the EA is	
I declare that I work pass trans	have ensured all necessary fi sactions.	elds are filled in prior to mal	king the abovementioned	
I declare that t	he information provided on t	his form is true and correct.		
Name of EA personr	nel			
Registration No.				
Signature and Date				