

16 May 2018



DATE OF APPLICATION

WORK PERMIT NUMBER

0 9373484-

HELPER NAME

SOE SOE

# To be signed by the various parties and uploaded as part of the issuance process



TYPE OF APPLICATION STANDARD APPLICATION

#### Part I. Helper and employment

#### About the helper

Full name SOE SOE

> FIN G2731546T

> > Myanmar

Work permit number 0 9373484-

Passport number MB146815

Passport expiry date 14 May 2020

Immigration pass Social Visit Pass

Nationality

**Female** Gender

Date of birth

10 Jun 1982

Birth place

Myanmar

Religion

**Buddhist** 

Ethnic group

Others

8 years of formal education?

Yes

Highest education level

Secondary without spm

or gce o level

Marital status

Married

Monthly salary

\$520

Rest days per month

Fee paid to Employment

520

Agency by the helper

## About the helper's spouse

### About the employment

Name

Residential status

Not a Singapore Citizen or Permanent Resident

Employer's name

ONG MEI AI

Place of employment

61 NEW UPPER CHANGI ROAD

#23-1202

Singapore 461061





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## Part I. Declaration by foreign domestic worker

#### I declare that:

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- I have read and understood the conditions of work permit, which are set out in the Employment of Foreign Manpower (Work Passes) Regulations c 91A, available at www.mom.gov.sg
- 2. I have had at least eight years of formal education and have the certificates to prove this. (This does not apply to you if you have been employed as a foreign domestic worker or confinement nanny in Singapore before.)
- 3. I have never been convicted of a criminal offence in any country or state.
- 4. For the purpose of assessing this application, I consent for the Government of Singapore and its statutory authorities to obtain from and verify employment, I also consent for the Government of Singapore and its statutory authorities to agents. For the purpose of my work pass systems, and to disclose such information to its authorised agents. For the purpose of my work pass systems, and to disclose such information to any relevant person or organisation.
- I consent to the Ministry of Manpower displaying my work pass details when my work pass card is scanned using the Ministry of Manpower's work pass mobile application.
- 6. All the documents that have been submitted on my behalf in support of this Application for a Work Permit are true copies of the authentic documents.

Name of worker

SOE SOE

Work permit number of worker

0 9373484
Signature of worker

Date (DD-MM-YYYY)

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## Part II. Prospective employer

## About the employer

Full name

ONG MEI AI

Gender

**Female** 

Date of birth

18 Dec 1958

Nationality

Singapore citizen

Residential status

Singapore citizen

NRIC

S1316655B

Marital status

Widowed

Housing type

HDB 5 rooms

#### **Contact details**

Mobile number

+65 91440557

Email

am2mei@yahoo.com.sg

Residential address

**61 NEW UPPER CHANGI** 

ROAD

#23-1202

Singapore 461061

## Employer's household details

Number of family members in the household (excluding employer and spouse): 1

KHOR BOCK ENG	S0812263F	Nric	20 Jan 1934	Mother
Full name	ID number	ID type	Date of birth	Relationship





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#### Part II. Declaration by employer

I declare that:

16 May 2018

- 1. I have read and understood the applicable conditions and regulatory conditions of work permit set out in the Employment of Foreign Manpower (Work Passes) Regulations ("EFMR"), available at www.mom.gov.sg.
- 2. In order for MOM to assess my application, I consent to the Government of Singapore and statutory authorities to getting from and verifying information with any person, organisation or any other source. Further, I consent to the information obtained in this process to be released to the Government of Singapore, its statutory authorities and their authorised agents.
- 3. To the best of my knowledge, the foreign domestic worker (if she has not worked as a foreign domestic worker or confinement nanny in Singapore before) has had a minimum of eight years of formal education and has educational certificates as documentary proof of this.
- 4. I have obtained written consent from the foreign domestic worker to perform this transaction. I will produce this consent when requested by the
- 5. I consent to the Ministry of Manpower displaying work pass details when the foreign domestic worker's work pass card is scanned using the Ministry of Manpower's work pass mobile application.
- 6. I am not related to the foreign domestic worker.
- 7. I have ensured that the foreign domestic worker fully understands the contents of PART I and that it was signed by the foreign domestic worker.
- 8. The information in this application and any appeals I have made in relation to this application are, to the best of my knowledge, true and correct; and that all documents submitted in support of this application and any appeals made in relation to the application, are true copies of the authentic documents.
- 9. I am aware of and shall fulfil my obligations as an employer of a foreign domestic worker under the Employment of Foreign Manpower Act (Chapter 91A) ("EFMA") and EFMR which includes the following:
  - a. Pay her salary promptly
  - b. Pay for her upkeep and maintenance, including medical treatment
  - c. Provide acceptable accommodation for her
  - d. Should she die while in Singapore, pay for her burial or cremation and pay for her body and belongings to be returned to her home
  - e. Take her to the Controller of Work Passes when required by MOM
  - f. Inform the Controller of Work Passes in writing within seven days when her employment ends by cancelling her work permit
  - g. Arrange and pay for her passage home, after giving her reasonable notice and paying her outstanding salary
- 10. I shall take reasonable steps to ensure that my foreign domestic worker complies with the EFMA and the EFMR. Such steps shall include reporting to the Controller of Work Passes if I know that she is non-compliant.
- I understand that if I breach any of my obligations as an employer of a foreign domestic worker, my Security Bond in the sum of \$5,000 which I have furnished to the Controller of Work Passes may be forfeited fully or in part. I also understand if there is only partial forfeiture, the Government of Singapore may forfeit the rest at a later point in time for the same breach or a different breach.
- 12. I also understand that if I breach any of my obligations as an employer of a foreign domestic worker, other enforcement actions may be taken against me in addition to my Security Bond being forfeited fully or in part.

Name of employer

ONG MEI AI

NRIC/FIN

S1316655B

Signature of employer

Date (DD-MM-YYYY)

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HELPER NAME

SOE SOE

Part III. Employment Agency

**About the Employment Agency** 

Name

UNITED CHANNEL

**EMPLOYMENT AGENCY** 

PTE. LT

Licence no.

07C4306

Telephone

+65 63448807

Address

## Part III. Declaration by Employment Agency

This declaration must be completed by the Employment Agency or intermediary who is making the application on behalf of the employer. (If more than one Employment Agency or intermediary is used, please download additional declaration sheets from MOM's website.)

I declare that:

1. I am the Employment Agency personnel handling this application.

2. To the best of my knowledge, the foreign domestic worker (if she has not worked as a foreign domestic worker or confinement nanny in Singapore before) has had a minimum of eight years of formal education and has educational certificates as documentary proof of this.

3. I have obtained written consent from the employer and foreign domestic worker to perform this transaction. I will produce this consent when requested by the authority.

4. I have explained the contents of the application and the applicable conditions and regulatory conditions of this work permit, as set out in the Employment of Foreign Manpower (Work Passes) Regulations c 91A, to the foreign employee and the employer.

5. The information in this application and any appeals I have made in relation to this application are, to the best of my knowledge, true and correct; authentic documents submitted in support of this application and any appeals made in relation to the application, are true copies of the

Name of Employment Agency personnel

**Employment Agency personnel number** 

**Employment Agency stamp** 

CONCOMENTAL CONTROL OF CONTROL OF

Signature of Employment Agency personnel

Date (DD-MM-YYYY)

2.2 MAY 2018