



WORK PERMIT NUMBER

HELPER NAME

19 Mar 2018

0 09232370

SRI PINANGGININGSIH

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



TYPE OF APPLICATION SPONSOR APPLICATION

# Part I. Helper and employment

# About the helper

SRI PINANGGININGSIH Full name

FIN

Work permit number

B7443381 Passport number

18 Jul 2022 Passport expiry date

Immigration pass

Nationality

G8576906K

0 09232370

**Current Workpass Holder** 

Indonesian

**Female** Gender

21 Sep 1989 Date of birth

Indonesia Birth place

Muslim Religion

Ethnic group Yes

8 years of formal education?

Secondary without spm Highest education level

or gce o level

Married

Indonesian

Marital status

\$550 Monthly salary

Rest days per month 4

550 Fee paid to Employment

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

Place of employment

NG PHUI PHUI AMELIA

**76 MARINE DRIVE** #13-05

Singapore 440076





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### Part I. Declaration by foreign domestic worker

I declare that:

- 1. 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 information with any person, organisation or any other source, and to disclose such information to its authorised agents. For the purpose of my employment, I also consent for the Government of Singapore and its statutory authorities to display my employment information on the MOM's work pass systems, and to disclose such information to any relevant person or organisation.
- 5. 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

SRI PINANGGININGSIH

Signature of worker

Work permit number of worker

0 09232370

Date (DD-MM-YYYY)

09 APR 2018





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CURRENT EMPLOYER NAME

**CHONG YUET CHENG** 

CONSENT GIVEN FOR TRANSFER

Yes

# Part II. Prospective employer

# About the employer

Full name

NG PHUI PHUI AMELIA

Gender

**Female** 

Date of birth

30 Jul 1974

Nationality

Singapore citizen

Residential status

Singapore citizen

NRIC

S7425276A

Marital status

Single

Housing type

HDB 4 rooms

## **Contact details**

Mobile number

+65 83815472

Email

missameliangphuiphui74 @gmail.com

Residential address

**76 MARINE DRIVE** 

#13-05

Singapore 440076





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#### Part II. Declaration by employer

#### I declare that:

- 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 authority.
- 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.
- 11. 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

NRIC/FIN

NG PHUI PHUI AMELIA

S7425276A

Signature of employer

Date (DD-MM-YYYY)

Amelia

09 APR 2018





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SRI PINANGGININGSIH

# Part III. Employer's sponsor(s)

### **About sponsor 1**

Relationship with employer

**Father** 

Full name

NG CHUN WAI

Male Gender

Date of birth

10 Dec 1941

Nationality

Singapore citizen

Residential status

Singapore citizen

NRIC

S1078206F

Marital status

Widowed

#### **Contact details**

Mobile number

+65 91303337

Email

missameliangphuiphui74 @gmail.com

Address

MARINE DRIVE **GARDENS 66 MARINE DRIVE** 

#10-194

Singapore 440066

#### Income details

Income used for application

Single Sponsor's income

Monthly income range

\$6,000 - \$7,999

Income proof

Others

#### Part III. Declaration by sponsor(s)

I/We declare that:

- a. I/We are responsible for the upkeep, maintenance and well-being of the foreign domestic worker.
- b. I/We remain responsible for this foreign domestic worker as long as we remain sponsor(s).
- c. If I/we apply for a new foreign domestic worker, MOM will take into consideration our existing responsibilities for the foreign domestic worker.
- d. I/We must pay the foreign domestic worker levy and all other employment related expenses on behalf of NG PHUI PHUI AMELIA, for as long as we remain sponsor(s).

Name of sponsor 1

NRIC/FIN/Passport number of sponsor 1

**NG CHUN WAI** 

S1078206F

Signature of sponsor 1 Cheen War.

Date (DD-MM-YYYY) 9 April 2018.

Date:	_
To: Work Permit Department Minstry Of Manpower 18 Havelock Road Singapore 059764  Dear Sir / Madam	
CONSENT TO TRANSFER FOREIGN DOMESTIC WORKER	
FOREIGN DOMESTIC WORKER	SRI Pinangginingsih
WORK PERMIT	0 092 323 70
DATE OF APPLICATION	1 9 MAR 2018
I, chorg gret cherg (Name of Current Employer)	of NRIC / Passport No
Agree to release my Foreign Domestic Worker named above to the prospective employer	
Ng Phyi Phyi Amelia (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.

X . My Signature of Current Employer





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SRI PINANGGININGSIH

# Part V. Employment Agency

# **About the Employment Agency**

Name

UNITED CHANNEL EMPLOYMENT AGENCY

PTE. LT

Licence no.

07C4306

Telephone

+65 63448807

Address

### Part V. 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; 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.

Name of Employment Agency personnel

**Employment Agency stamp** 

Employment Agency personnel number no many

Date (DD-MM-YYYY)

09 APR 2018

Signature of Employment Agency personnel

May May Ob.