

DATE OF APPLICATION
26 Sep 2018WORK PERMIT NUMBER
0 94453003HELPER NAME
KAY ZAR TUN

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

Full name	KAY ZAR TUN	Date of birth	15 Jul 1989
FIN	-	Birth place	Myanmar
Work permit number	0 94453003	Religion	Buddhist
Passport number	MD572361	Ethnic group	Burmese
Passport expiry date	12 Sep 2023	8 years of formal education?	Yes
Immigration pass	Not in Singapore	Highest education level	Secondary without spm or gce o level
Nationality	Myanmar	Marital status	Single
Gender	Female	Monthly salary	\$450
		Rest days per month	0
		Fee paid to Employment Agency by the helper	450

About the employment

Employer's name	IRENE NG KIM KEE
Place of employment	268 TAMPINES STREET 21 #10-243 Singapore 520268



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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
KAY ZAR TUN

Work permit number of worker
0 94453003

Signature of worker

Kay

Date (DD-MM-YYYY)

13/10/18



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Part II. Prospective employer

About the employer

Full name **IRENE NG KIM KEE**
 Gender **Female**
 Date of birth **15 Nov 1952**
 Nationality **Singapore citizen**
 Residential status **Singapore citizen**
 NRIC **S0097549D**
 Marital status **Divorced**
 Housing type **HDB 4 rooms**

Contact details

Mobile number **+65 83386397**
 Email **diana_keng@yahoo.com.sg**
 Residential address **268 TAMPINES STREET
21
#10-243
Singapore 520268**

Employer's household details

Number of family members in the household (excluding employer and spouse): 2

Full name	ID number	ID type	Date of birth	Relationship
POH SANN YEUNG LAYEONA	T1513815C	Birth Certificate	07 May 2015	Granddaughter
POH SANN YOUNG DAYENUS	T0911744F	Birth Certificate	25 Apr 2009	Granddaughter



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Part II. Declaration by employer

I declare that:

- I do not have any medical condition(s) that will impair my ability to supervise and ensure the well-being of my foreign domestic worker.
- 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.
- 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.
- 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.
- I have obtained written consent from the foreign domestic worker to perform this transaction. I will produce this consent when requested by the authority.
- 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.
- I am not related to the foreign domestic worker.
- 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.
- 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.
- 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:
 - Pay her salary promptly
 - Pay for her upkeep and maintenance, including medical treatment
 - Provide acceptable accommodation for her
 - 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
 - Take her to the Controller of Work Passes when required by MOM
 - Inform the Controller of Work Passes in writing within seven days when her employment ends by cancelling her work permit
 - Arrange and pay for her passage home, after giving her reasonable notice and paying her outstanding salary
- 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.
- 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

IRENE NG KIM KEE

NRIC/FIN

S0097549D

Signature of employer

Date (DD-MM-YYYY)

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MINISTRY OF
MANPOWERDATE OF APPLICATION
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Part III. Employer's sponsor(s)

About sponsor 1

Relationship with employer	Son	Full name	POH LIP KEONG DAVE (FU LIQIANG)
Gender	Male	Date of birth	08 Mar 1976
Nationality	Singapore citizen	Residential status	Singapore citizen
NRIC	S7607105E	Marital status	Married

About sponsor 1's spouse

Full name	LIM HUI SIANG LINDA (LIN HUICHANG)	Gender	Female
Nationality	Singapore citizen	Date of birth	12 Jun 1976
NRIC	S7617438E	Residential status	Singapore citizen

Contact details

Mobile number	+65 83386397	Email	diana_keng@yahoo.com.sg
Address	BELISA 57 PASIR RIS DRIVE 1 #04-07 Singapore 519531		

Part III. Declaration by sponsor(s)

I/We declare that

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

Name of sponsor 1
POH LIP KEONG DAVE (FU LIQIANG)NRIC/FIN/Passport number of sponsor 1
S7607105E

Signature of sponsor 1

Date (DD-MM-YYYY)

13-10-2018



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HELPER NAME

KAY ZAR TUN

Part IV. Employment Agency**About the Employment Agency**Name **UNITED CHANNEL
EMPLOYMENT AGENCY
PTE. LT**Licence no. **07C4306**Telephone **+65 63448807**

Address

Part IV. 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.

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

Huang Yuling
R1658004

Employment Agency personnel number

Huang Yuling
R1658004

Signature of Employment Agency personnel

Date (DD-MM-YYYY)

13/10/18