

IPA No: 35559307-050315

FIN: F7649046P

T C KHOO & CO PTE LTD 35 SENOKO WAY SINGAPORE 758051

09 Mar 2015

Dear Sir / Madam

We are pleased to inform you that the Work Permit application for PHANG AH KHOON has been approved inprinciple. Your worker may start work after the Work Permit has been issued.

This letter contains the employment details for you to confirm and the next steps you need to complete so that a Work Permit card may be issued to your worker. If you do not complete these steps by 23 Mar 2015, this approval will be revoked.

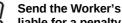
Yours faithfully

Penny Han (Mrs)

Controller of Work Passes

Check the details. If you have any corrections, please send in your amendments with the supporting Check the details. If you have any confections, prease send in your amount and application is required.

Industry	MANUFACTURING	CPF Submission Number	197500399G - PTE - 01
Worker's name	PHANG AH KHOON	Basic monthly salary	S\$ 1000
Date of Birth	20 DEC 1958	Fixed monthly allowances	S\$ 0
Nationality	MALAYSIAN	Fixed monthly salary	S\$ 1000
Passport number	A34689991	Monthly housing deduction	S\$ 0
Work Permit number	3 5559307-	Monthly food deduction	S\$ 0
Date of Application 05 MAR 2015		Monthly salary after taking	S\$ 1000
Occupation	MANUFACTURING into account fixed OPERATOR allowances and d		
		Housing provided	NO
		Monthly Levy Rate	S\$ 250-\$650



Send the Worker's Copy of the In-Principle Approval letter to your worker. Otherwise, you may be liable for a penalty of up to S\$10,000 and/or any other administrative action.



Comply with the Employment of Foreign Manpower Act, and the Conditions and Regulatory Conditions of Work Permit, available at www.mom.gov.sg. Otherwise, the Work Permit may be revoked and you may face criminal or administrative penalties (including debarment).



The actual monthly levy rate varies from month to month, depending on the employer's workforce profile.



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Please complete the following tasks so that your worker may receive their Work Permit card:

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### Before you request for the Work Permit card to be issued

- Send the Worker's Copy of the In-Principle Approval letter to your worker.
- Provide your worker with a copy of the employment contract. This contract should state the occupation, job scope, daily working hours, number of working days, basic monthly salary, and terms such as deductions, rate of overtime pay, and leave entitlements.
- Buy medical insurance (inpatient care and day surgery) of at least S\$15,000 per year for your worker.
- Buy Work Injury Compensation Insurance for your worker.



### Request for the Work Permit card to be issued

Login to the WPOL by 23 Mar 2015 to request for the Work Permit to be issued. Otherwise, this approval
will be revoked. If you need help, please refer to the 'Step by Step Guide to Issue A Foreign Worker's
Work Permit' via WPOL, or visit www.mom.gov.sg (click on Foreign Manpower > Passes & Visas > Work
Permit (Foreign Worker) > After you apply).



#### Upon approval of request

- When your request has been approved, please print the Notification Letter.
- Have your worker report to the MOM Services Centre, Hall C with the documents listed in the Notification Letter



#### Work Permit card delivery

Your card will be delivered to you. You will receive an SMS/email alert prior to the delivery date.



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PHANG AH KHOON c/o T C KHOO & CO PTE LTD 35 SENOKO WAY SINGAPORE 758051

09 Mar 2015

#### Dear PHANG AH KHOON

We are pleased to inform you that your application for a Work Permit has been approved in-principle. This letter serves as confirmation and explains what to do next. You should keep this letter as it contains important information on your employment in Singapore.

This letter may be used:

 To start work as a MANUFACTURING OPERATOR for T C KHOO & CO PTE LTD after your Work Permit has been issued.

Your employer must request for the Work Permit card to be issued by 23 Mar 2015 or this approval will expire.

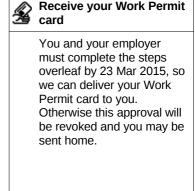
Yours sincerely

Penny Han (Mrs)

Controller of Work Passes

What happens next? Please follow these simple steps to get your Work Permit card. You will find the complete set of instructions on pages 2 and 3.

Check and confirm your employment details in this letter.  Protect yourself by knowing your rights and responsibilities whilst working in Singapore  Ensure that this In-Principle
•
approval has not been cancelled nor expired.







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Important: Ensure that this approval has not been cancelled nor expired.

Check via www.mom.gov.sg (click Services & Forms > Passes > Work Permit for Foreign Workers > Work Permit Validity Check via Work Permit Online) or call us at +65 64385122. You will need to enter your Work Permit number and Date of Application displayed below.

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## Check your details

If you find a problem with the details of your employment, please contact your employer or employment agent immediately.

	PUANO AUTODI
Your name	PHANG AH KHOON
Date of Birth	20 DEC 1958
Nationality	MALAYSIAN
Passport number	A34689991
Work Permit Number	3 5559307-
Date of Application	05 MAR 2015
Employer name	T C KHOO & CO PTE LTD
Employer CPF Submission Number	197500399G - PTE - 01
Industry	MANUFACTURING
Occupation	MANUFACTURING OPERATOR
Basic monthly salary	S\$ 1000
Fixed monthly allowances	S\$ 0
Fixed monthly salary	S\$ 1000
Monthly housing deduction	S\$ 0
Monthly food deduction	S\$ 0
Monthly salary after taking into account fixed monthly allowances and deductions	S\$ 1000
Housing provided	NO

Additional allowances may be provided by the employer and these allowances should be stated in your employment contract.

## In-Principle Approval for Work Permit Worker's Copy - English



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## **M**

#### Protect yourself - Know your rights and responsibilities

- A You are only permitted to work in Singapore as a / an MANUFACTURING OPERATOR for T C KHOO & CO PTE LTD.
- B You or your employer has the right to terminate your job at any time with sufficient notice.
- C Your employer or employment agent should provide a copy of your employment contract to you. The contract should state your occupation, job scope, daily working hours, number of working days, basic monthly salary, and terms such as deductions, rate of overtime pay, and leave entitlements.
- **D** It is against the law for your employer to make you pay:
  - · Fees for application, renewal or the cancellation of your Work Permit
  - · Foreign Worker Levy
  - · Fees for medical insurance, medical examinations or training courses
  - · Cost of your journey home
- **E** If you use an agent in your home country, be careful about fees and promises. The Singapore Government is unable to help you with disputes with your agent in your home country.
- F You must comply with the provisions of the Employment of Foreign Manpower Act and Conditions of Work Permit. Failure to do so may result in the revocation of your Work Permit and you may be prosecuted and/or sent home. You may view the information at www.mom.gov.sg (click on Foreign Manpower > Passes & Visas > Work Permit (Foreign Worker) > Before you apply).



#### **Receive your Work Permit card**

Your employer must complete the following tasks by 23 Mar 2015. Otherwise, this approval will be revoked and you risk being sent home.

· Apply for your Work Permit card to be issued and delivered.

ALL EIGHTION FOR A TIONAL ENGIN					
USER ID WPNO COMPANY CPF SUBMISSION NO.	:1630482 :3 5559307- :197500399G - PTE - 01	USER NAME DOA DATE / TIME	:T C KHOO & CO PTE LTD :05/03/2015 :12 March 2015 11:31 AM		
PART I PERSONAL PARTICULAR	RS OF FOREIGN EMPLOYEE				
NAME DATE OF BIRTH NATIONALITY STATE / PROVINCE where the foreigner obtained his / her nationality MARITAL STATUS RACE MALAYSIAN OLD IC NO. PRC IC NO. TRAVEL DOCUMENT NO. TRAVEL DOCUMENT EXPIRY DATE EDUC	:PHANG AH KHOON :20/12/1958 :MALAYSIAN :OTHERS :MARRIED :CHINESE :5559307 : :A34689991 :23/08/2020	PLACE OF BIRTH STATE / PROVINCE OF BIRTH SEX RELIGION COLOR OF IC MALAYSIAN NEW IC NO. FIN TRAVEL DOCUMENT TYPE	:MALAYSIA :OTHERS :MALE :BUDDHIST :MALAYSIAN BLUE :581220075409 :F7649046P :PASSPORT		
YEARS OF WORKING EXP EXPIRY DATE OF LTVP CATEGORY OF WORKER'S LTVP / DP	:PRIMARY 6 : :	ENDORSEMENT TYPE NAME OF INSTITUTION	:SOCIAL VISIT PASS		
PARTICULARS OF EMPLOYMENT EMPLOYMENT STATUS	T :EMPLOYEE	NAME OF EMPLOYER	:T C KHOO & CO PTE LTD		
OCCUPATION CODE OCCUPATION DESCRIPTION	:93200A :MANUFACTURING OPERATO	DR			
HOUSING PROVIDED	:NO				
BASIC MONTHLY SALARY	:S\$1000				
FIXED MONTHLY ALLOWANCES	:NO	FIXED MONTHLY DEDUCTIONS	:NO		
FIXED MONTHLY ALLOWANCES FIXED MONTHLY SALARY	:S\$0 :S\$1000	HOUSING DEDUCTION FOOD DEDUCTION	:S\$0 :S\$0		
MONTHLY SALARY AFTER TAKING INTO ACCOUNT FIXED MONTHLY ALLOWANCES AND DEDUCTIONS	:S\$1000				
VETTING AUTHORITY TRAINING DURATION SUPPORT AUTHORITY	:	SUPPORT FROM VA?	:		
PARTICULARS OF FOREIGN EMP WORKER MARRIED TO SC / SPR					
NAME DATE OF MARRIAGE DATE OF BIRTH RESIDENTIAL STATUS IC NO. (SC / SPR) MALAYSIAN OLD IC NO. PASSPORT NO.	: : : : : :	PLACE OF MARRIAGE NATIONALITY COLOR OF IC DATE OF SPR ISSUANCE MALAYSIAN NEW IC NO.	: : : : :		
PART I (A) DECLARATION BY FOREIGN EMPLOYEE					
I declare that -  (a) I have read and understood	I the applicable conditions of wo	rk permit, as specified in the Em	nployment of Foreign Manpower (Work		

- Passes) Regulations c.91A, available at www.mom.gov.sg.

  (b) I have / have never\* been convicted in any country or state of an criminal offence (if applicable, please provide details)

## \*Delete accordingly

- (c) The information as set out in PART I is true and correct; and that all documents I have submitted in support of this application for a Work Permit are true copies of the authentic documents.
  (d) For the purpose of setting up a bank account as part of this work permit application, I consent to the Ministry of Manpower
- disclosing my personal particulars and work permit information to the bank.

Signature of Foreign Employee	
	Date: (DD-MM-YYYY)

VVFINO	. o papaou <i>i-</i>	DOA		. UƏ/UƏ/ZU1Ə		
PART II PAF	TICULARS OF COMPANY OR EMP	LOYER				
MAIN CONTE	RACTOR / SHIPYARD	:				
CPF SUBMIS	SION NO. OF MAIN SHIPYARD / MA	AIN CONTRACTOR:				
NAME		:T C KHC	O & CO PTE LTD			
ADDRESS	RESS :35 SENOKO WAY SINGAPORE 758051					
BUSINESS A	BUSINESS ACTIVITY :SPINNING, WEAVING AND FINISHING OF TEXTILES					
CPF SUBMIS	SION NO. :197500399G - PTE - 01	REGISTRATION NO. :19750 (ACRA)	00399G PRIOR REF NO		:	
TELEPHONE	:67582119		FAX		:67532978	
TEMPORARY	PERMIT ISSUED AT THE TIME OF	SUBMISSION? : NO				
NAME OF CU	EMPLOYER GIVEN FOR TRANSFER?: JRRENT EMPLOYER: DECLARATION BY EMPLOYER					
WP NO. NAME OF WO CPF SUBMIS NAME OF EN	SION NO. : 197500399G - P	PTE - 01	DOA	: 05/03/2015		
I declare that (a)	I am authorised to bind the employer I have read and understood the a Employment of Foreign Manpower (V	applicable conditions and reg	gulatory conditions	of work permi	t, as specified in the	
(b) The employer consents, for the purpose of assessing this application, for the Government of Singapore and statutory authorities thereof to obtain from and verify information with any person, organisation or any other source; and further, to the release of all information thereby obtained to the Government of Singapore, statutory authorities and authorised agents thereof.						
(c) The employer is aware that the Controller of Work Passes uses its Central Provident Fund contribution information to determine the number of local workers employed by the employer hence determining the number of foreign employees that it may employ. The employer has ensured that its Central Provident Fund contribution record of payments as employer required under the Central Provident Fund Act (Cap.36) only reflects every citizen or permanent resident of Singapore who is employed by the employer and at the appropriate contribution rate prescribed by law. The employer has made any voluntary CPF contributions only through a separate CPF Submission Number (CSN).						
(d)						
(e)						
*Delete accordingly	The employer has I has not* used the services of an Employment Agency based in Singapore for the recruitment and application of a work permit for this foreign employee.  (If applicable: Employment Agency Licence No.					
(g) The information as set out in <b>PART II</b> and any appeals the employer has 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 this application, are true copies of the authentic documents.						
Name of Aut	horised Representative:		Organisation Stam	<b>D</b> :		

Date:

(DD-MM-YYYY)

NRIC:
Designation:
Signature:

IS A SINGAPORE EMPLOYMENT A NUMBER: 3 5559307-) : NO	GENCY USED FOR THE PU	RPOSES OF	THIS AI	PPLICATI	ON FOR PHA	ANG A	H KHOON (	WP
NAME OF SINGAPORE EMPLOYMENT AGENCY	:			_ LIC	ENCE NO.	: _		
OPERATING ADDRESS	:			_ TEI	EPHONE	: _		
FEE PAYABLE TO SINGAPORE E	MPLOYMENT AGENCY							
ANY FEES PAID BY THE EMPLOYE	EE TO THE SINGAPORE EMP	PLOYMENT A	GENCY	Y:				
FEES FOR COSTS INCURRED OVERSEAS	: S\$							
AGENCY FEE	: S\$							
PART III (A) DECLARATION BY SII Singapore Employment Agency. If m website)								
I declare that -								
officer of the employer.  (c) The information as set out knowledge, true and correct	nts of the application and the of Foreign Manpower (Work	ne applicable Passes) Reg opeals I have re submitted i	conditions made in suppo	ons and one c.91A to in relation	the foreign e	mployecation	ee and the a	authorised est of my
Name of Employment Agency Perso	onnel:		Employ	yment Ag	ency Stamp:			
Employment Agency Personnel Nur	nber:							
Signature:								
		С	ate:				(DD-MN	M-YYYY)
_	COMPLETED BY CURRENT IAMED ABOVE IS APPLYING				-			
	CONSENT TO TRANS	FER FOREIG	N EMPI	LOYEE				
I,		agree to r	elease	PHANO	AH KHOON	3 555	9307-	
(Name of Company)					and WP Num			
to the prospective employer TCK	HOO & CO PTE LTD							
( Nam	ne of Prospective Company )							
because								
Pending the outcome of the applicat work permit (if necessary). If the apemployee.								
Name of Declarant:			Organi	sation Sta	amp:			
NRIC:								
Designation:								
Signature:								
						<u> </u>	<u> </u>	
			ate:	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$			(DD-MN	M-YYYY)



# Casino Self-Exclusion Application Form For Foreigners

# **USE BLOCK LETTERS**

Personal Particulars	
Name (as in Passport)	Passport No
PHANG AH KHOON	A34689991
Date of Birth (dd/mm/yyyy)	FIN No (if available)
20/12/1958	F7649046P
Nationality	Gender
MALAYSIAN	MALE
Contact Information (of Employer in Singa	pore – If available)
Address	
35 SENOKO WAY SINGAPORE 758051	
Contact No	Email (if available)
67582119	N.A.

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<b>Declaration for Applicant (Please</b>	ease Tick All Boxes)			
that the effect of this applica Singapore. I further understar submission of this application aware that if I choose to ent	tion is that I will be excluded and that this exclusion shall take to the National Council on Proter or remain on the Casino y gaming activities, any winning	Self-Exclusion application, and from entering the casinos in the effect immediately upon my blem Gambling. I am also fully premises after submitting the last paid or payable to me shall winnings.		
$\hfill \square$ I declare that this application any duress.	n is made voluntarily, without	any force or coercion or under		
apply to revoke from NCPG a	fter a period of at least 1 year articulars to the relevant ager	ay in force indefinitely, unless I . I also understand that NCPG ncies and organizations under y Self-Exclusion.		
	g that I may be liable to crimir	cation is true and correct and I nal prosecution if I have stated true.		
Signature		Date		
PLEASE COMPLETE AND SEND THIS FORM BY HAND OR BY REGISTERED MAIL TO:  THE NATIONAL COUNCIL ON PROBLEM GAMBLING 510 THOMSON ROAD #05-01 SLF BUILDING SINGAPORE 298135				
For Administrative Use only				
	Date / Time	Signature		
Received by:				
Processed by:				

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