

The form has been uploaded here with some dummy information for your kind information:

Application for Work Permit Amendment																																								
1. Basic Instructions		2. Applicant Details		3. Attachments																																				
4. Declaration		5. Payment & Submit																																						
Basic Instructions <p>Did you receive last work-permit through online OSS? *</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>Effective date of the previous WP *</p> <p>dd-mm-yyyy <input type="button" value=""/></p>																																								
Basic Company Information (Non editable info. pulled from the basic information provided at the first time by your company) <table border="1"> <tr> <td colspan="2">Company Information:</td> </tr> <tr> <td>Department</td> <td>Registration and Incentives – I (Industry - Foreign)</td> </tr> <tr> <td>Name of Organization</td> <td>Name of the Local company</td> </tr> <tr> <td>Name of Organization (Bangla)</td> <td>Name of the Local company (Bangla)</td> </tr> <tr> <td>Desired Service from BIDA</td> <td>Local Industry Registration</td> </tr> <tr> <td>Ownership status</td> <td>Partnership</td> </tr> <tr> <td>Type of the organization</td> <td>Partnership organization</td> </tr> <tr> <td>Major activities in brief</td> <td></td> </tr> </table>					Company Information:		Department	Registration and Incentives – I (Industry - Foreign)	Name of Organization	Name of the Local company	Name of Organization (Bangla)	Name of the Local company (Bangla)	Desired Service from BIDA	Local Industry Registration	Ownership status	Partnership	Type of the organization	Partnership organization	Major activities in brief																					
Company Information:																																								
Department	Registration and Incentives – I (Industry - Foreign)																																							
Name of Organization	Name of the Local company																																							
Name of Organization (Bangla)	Name of the Local company (Bangla)																																							
Desired Service from BIDA	Local Industry Registration																																							
Ownership status	Partnership																																							
Type of the organization	Partnership organization																																							
Major activities in brief																																								
Information of Principal Promoter/ Chairman/ Managing Director/ State CEO: <table border="1"> <tr> <td>Country</td> <td>Albania</td> <td>Date of Birth</td> <td>23-Oct-2019 <input type="button" value=""/></td> </tr> <tr> <td>Passport No.</td> <td></td> <td>Designation</td> <td>web developer</td> </tr> <tr> <td>Full Name</td> <td>Full Name</td> <td>District/ City/ State</td> <td>District/ City/ State</td> </tr> <tr> <td>State/ Province</td> <td>State/ Province</td> <td>Post/ Zip Code</td> <td>1111</td> </tr> <tr> <td>House, Flat/ Apartment, Road</td> <td>House, Flat/ Apartment, Road</td> <td>Telephone No.</td> <td>+880 2-34567890</td> </tr> <tr> <td>Mobile No.</td> <td>+880 1234-567890</td> <td>Father's Name</td> <td></td> </tr> <tr> <td>Email</td> <td>a@b.n</td> <td>Mother's Name</td> <td></td> </tr> <tr> <td>Fax No.</td> <td></td> <td>Spouse name</td> <td></td> </tr> <tr> <td>Gender</td> <td>Male</td> <td></td> <td></td> </tr> </table>					Country	Albania	Date of Birth	23-Oct-2019 <input type="button" value=""/>	Passport No.		Designation	web developer	Full Name	Full Name	District/ City/ State	District/ City/ State	State/ Province	State/ Province	Post/ Zip Code	1111	House, Flat/ Apartment, Road	House, Flat/ Apartment, Road	Telephone No.	+880 2-34567890	Mobile No.	+880 1234-567890	Father's Name		Email	a@b.n	Mother's Name		Fax No.		Spouse name		Gender	Male		
Country	Albania	Date of Birth	23-Oct-2019 <input type="button" value=""/>																																					
Passport No.		Designation	web developer																																					
Full Name	Full Name	District/ City/ State	District/ City/ State																																					
State/ Province	State/ Province	Post/ Zip Code	1111																																					
House, Flat/ Apartment, Road	House, Flat/ Apartment, Road	Telephone No.	+880 2-34567890																																					
Mobile No.	+880 1234-567890	Father's Name																																						
Email	a@b.n	Mother's Name																																						
Fax No.		Spouse name																																						
Gender	Male																																							
Office Address: <table border="1"> <tr> <td>Division</td> <td>Barisal</td> <td>District</td> <td>Barguna</td> </tr> <tr> <td>Police Station</td> <td>Amtali</td> <td>Post Office</td> <td>office</td> </tr> <tr> <td>Post Code</td> <td>4512</td> <td>House, Flat/ Apartment, Road</td> <td>House</td> </tr> <tr> <td>Telephone No.</td> <td>+880 2345678</td> <td>Mobile No.</td> <td>+880 2-3456789</td> </tr> <tr> <td>Fax No.</td> <td></td> <td>Email</td> <td>dhaka@mail.com</td> </tr> </table>					Division	Barisal	District	Barguna	Police Station	Amtali	Post Office	office	Post Code	4512	House, Flat/ Apartment, Road	House	Telephone No.	+880 2345678	Mobile No.	+880 2-3456789	Fax No.		Email	dhaka@mail.com																
Division	Barisal	District	Barguna																																					
Police Station	Amtali	Post Office	office																																					
Post Code	4512	House, Flat/ Apartment, Road	House																																					
Telephone No.	+880 2345678	Mobile No.	+880 2-3456789																																					
Fax No.		Email	dhaka@mail.com																																					
Factory Address: <table border="1"> <tr> <td>District</td> <td>Bandarban</td> <td>Police Station</td> <td>Alikadam</td> </tr> <tr> <td>Post Office</td> <td>1111</td> <td>Post Code</td> <td>1111</td> </tr> <tr> <td>House, Flat/ Apartment, Road</td> <td>House, Flat/ Apartment, Road</td> <td>Telephone No.</td> <td>234567op</td> </tr> <tr> <td>Mobile No.</td> <td>2345678</td> <td>Fax No.</td> <td></td> </tr> <tr> <td>Email</td> <td>a@v.b</td> <td>Mouja No.</td> <td>1</td> </tr> </table>					District	Bandarban	Police Station	Alikadam	Post Office	1111	Post Code	1111	House, Flat/ Apartment, Road	House, Flat/ Apartment, Road	Telephone No.	234567op	Mobile No.	2345678	Fax No.		Email	a@v.b	Mouja No.	1																
District	Bandarban	Police Station	Alikadam																																					
Post Office	1111	Post Code	1111																																					
House, Flat/ Apartment, Road	House, Flat/ Apartment, Road	Telephone No.	234567op																																					
Mobile No.	2345678	Fax No.																																						
Email	a@v.b	Mouja No.	1																																					
Previous Information <table border="1"> <thead> <tr> <th>#</th> <th>Field Name</th> <th>Existing Information</th> <th>Proposed Amendment</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Full Name *</td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>2</td> <td>Position/ Designation *</td> <td></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>					#	Field Name	Existing Information	Proposed Amendment	1	Full Name *		<input type="checkbox"/>	2	Position/ Designation *		<input type="checkbox"/>																								
#	Field Name	Existing Information	Proposed Amendment																																					
1	Full Name *		<input type="checkbox"/>																																					
2	Position/ Designation *		<input type="checkbox"/>																																					

3	Passport No *	
4	Nationality *	Select One

Previous duration

#	Information	Start Date *	End Date *	Duration (Days)
	Existing Information	dd-mm-yyyy	dd-mm-yyyy	
<input type="checkbox"/>	Proposed Amendment	dd-mm-yyyy	dd-mm-yyyy	

Compensation and Benefit

Salary structure	Existing Information			Proposed Amendment		
	Payment	Amount	Currency	Payment	Amount	Currency
<input type="checkbox"/> a. Basic salary/ Honorarium ?	Monthly	0.00	AWG	Monthly	0.00	AWG
<input type="checkbox"/> b. Overseas allowance ?	Monthly	0.00	AWG	Monthly	0.00	AWG
<input type="checkbox"/> c. House rent ?	Monthly	0.00	AWG	Monthly	0.00	AWG
<input type="checkbox"/> d. Conveyance ?	Monthly	0.00	AWG	Monthly	0.00	AWG
<input type="checkbox"/> e. Medical allowance ?	Monthly	0.00	AWG	Monthly	0.00	AWG
<input type="checkbox"/> f. Entertainment allowance ?	Monthly	0.00	AWG	Monthly	0.00	AWG
<input type="checkbox"/> g. Annual Bonus ?	Monthly	0.00	AWG	Monthly	0.00	AWG
<input type="checkbox"/> h. Other fringe benefits (if any) ?	Maximum 350 characters 0/350			Maximum 350 characters 0/350		

Necessary documents to be attached here (Only PDF file)

No.	Required attachment (you may prefer to select file from recent attachment) ?	Attached PDF file (Each File Max. size 2MB)
1	test doc WPA-I Recent attachment	<input type="button" value="Choose File"/> No file chosen
N.B	All documents shall have to be attested by the Chairman/ CEO / Managing director/ Country Manager/ Chief executive of the Company/ firms.	Document's must be submitted by an authorized person of the organization including the letter of authorization.

Service Fee Payment

Contact name *	daud islam feni	Contact email *	addaud2014@gmail.com
Contact phone *	+880 1521-394024	Contact address *	asdfsdf
Pay amount	250	VAT/ TAX	0
Bank Charge	0	Total Amount	250.00
Payment Status	Not Paid	Vat/ tax and service charge is an approximate amount, it may vary based on the Sonali Bank system.	

[Save as Draft](#)

[Payment & Submit ?](#)