

Section A

Employer details

Attach a copy of the full employment agreement and complete the following.

A1 State the name of the person to whom you have offered a position in your business

Family/last name

Given/first name(s)

PARDEEP SINGH

A2 Full name of person completing this form.

SIDDHARTHA DOMA

Position or title of person completing this form.

DIRECTOR

Business name (if applicable) and physical and postal addresses.

FABRIL SOLUTIONS LIMITED
3/1A, PRANGLEY AVENUE, MANGERE, 2022

Telephone (daytime) Telephone (evening)

Fax Email admin@fabril-solutions.co.nz

Website Mobile 0204057777

A3 New Zealand Business Number (NZBN)

Write your NZBN below if applicable/known

9429042434795

A4 How long has this business been in operation? 2 YEARS

A5 How many people does the business currently employ? 20

A6 How many current employees are New Zealand citizens or residence class visa holders? 01

A7 Has the business made anybody redundant, or been through a consultation with respect to potential redundancies, in the past six months?

☐ Yes Provide details, including how many people were affected and their roles.

☒ No

N/A

A8 State the names of any associated companies or businesses (such as parent or subsidiary companies, and companies associated with substantial owners or directors of this business).

N/A