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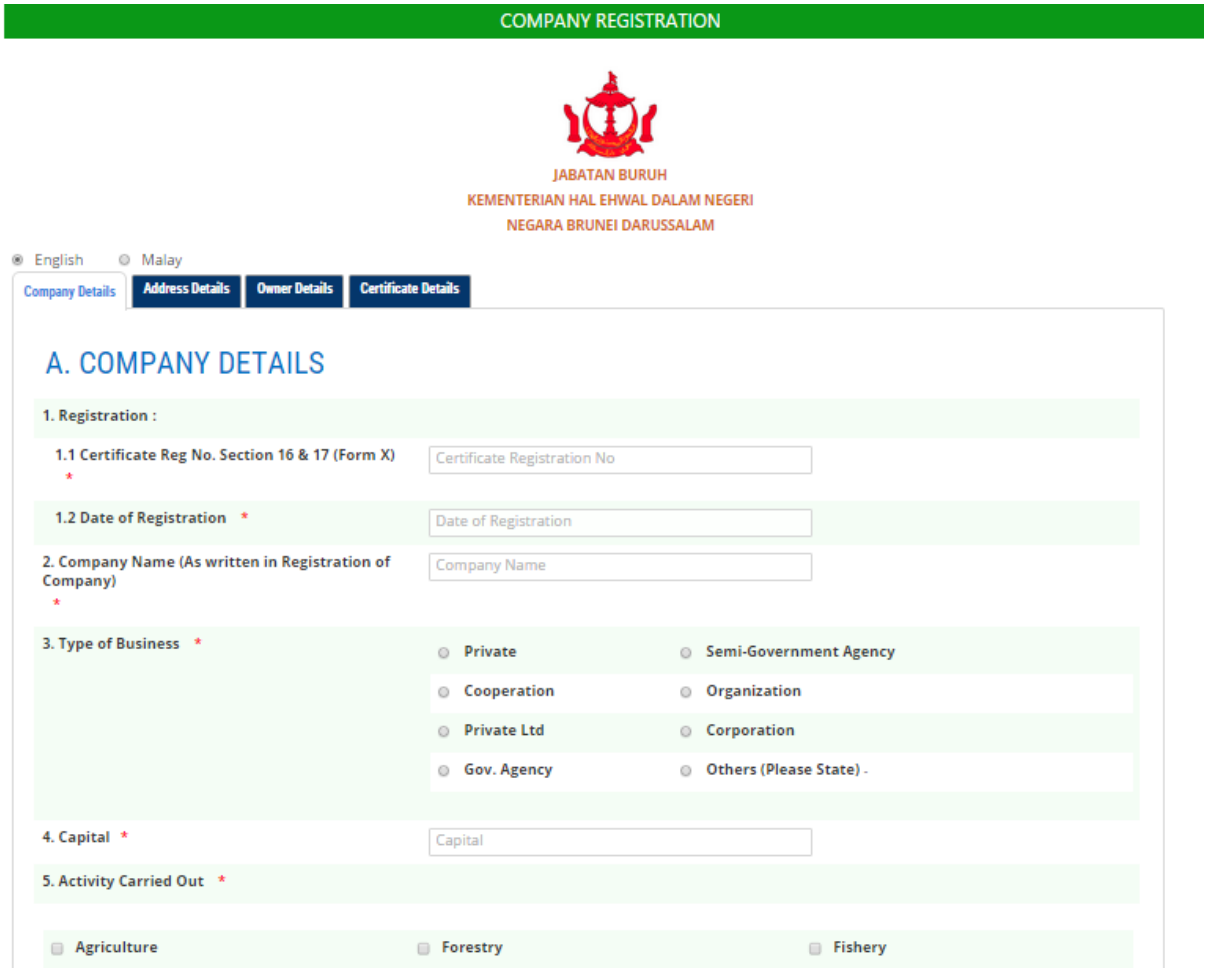
3.2 COMPANY REGISTRATION FORM

THIS FORM IS **MANDATORY** FOR ALL **COMPANIES** USING LCS TO REGISTER FOR THE FIRST TIME.

THIS FORM IS TO BE USED FOR ONE COMPANY ACCOUNT ONCE ONLY.



A. COMPANY DETAILS TAB

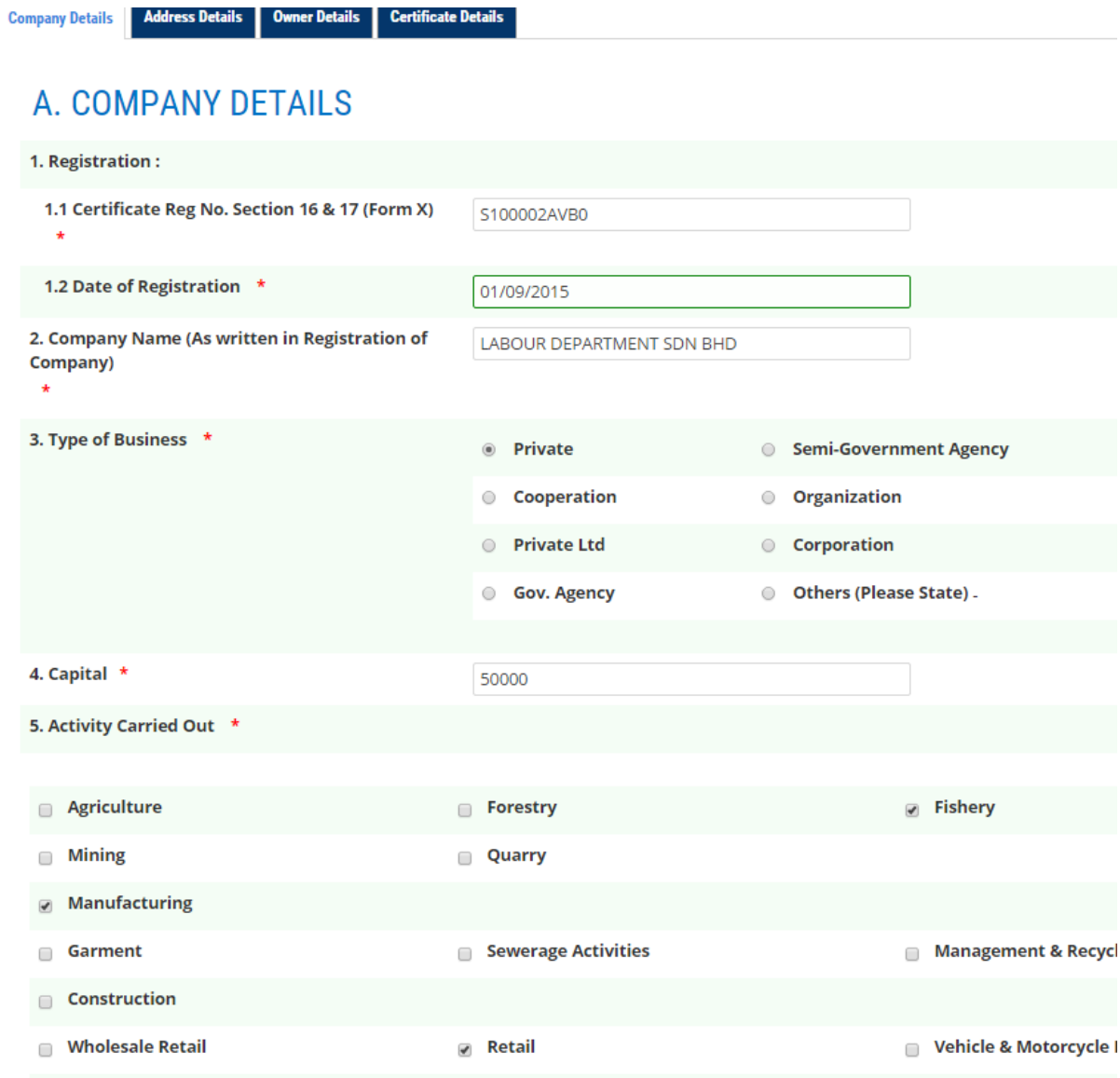
THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES

MANDATORY FIELDS	SAMPLE	NOTES
"**Certificate Reg No. Section 16 & 17 (Form X)**"	*S100002AVB0*	*Please provide the 16-17 Company Registration number as shown exactly on the certificate.*
"**Date of Registration**"	*01/09/2015*	*Please provide the exact date of Registration of the 16-17 Certificate.*

"**Company Name (As written in Registration of Company)"**	*LABOUR DEPARTMENT SDN BHD*	-
"**Type of Business**"	*Private*	*Please state the type of business.*
"**Capital**"	*"50000"*	*Please provide the estimated capital of the business.*
"**Activity Carried Out**"	*"Fishery, Manufacturing, Retail"*	*You may select multiple Activities to be carried out under this company name, these selections will determine the TYPE of QUOTA Applicant are applying for.*

OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-

A. COMPANY DETAILS – SAMPLE COMPLETED TAB



B. ADDRESS DETAILS TAB

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES

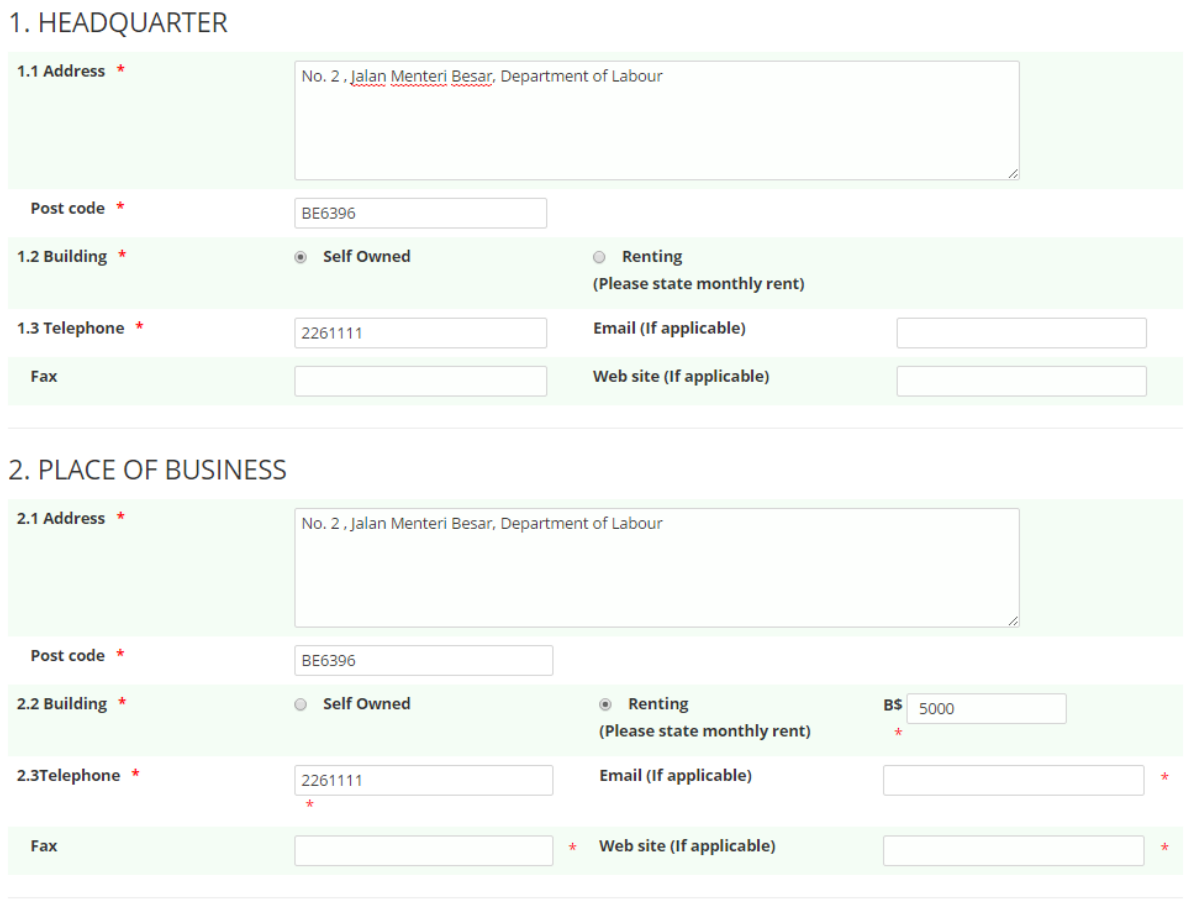
MANDATORY FIELDS	SAMPLE	NOTES
"**HQ – Address**"	No. 2 , Jalan Menteri Besar, Department of Labour	-
"**HQ – Postcode**"	BE6396	-

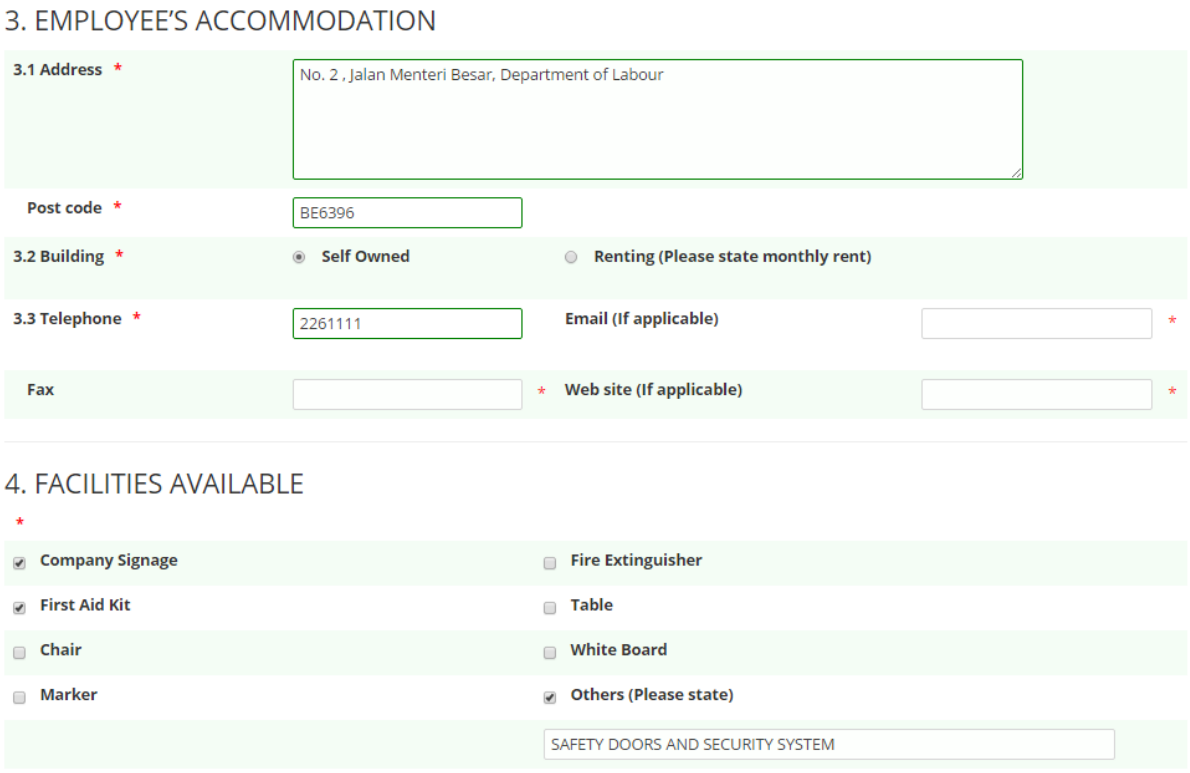
"**HQ – Building**"	SELF-OWNED	-
"**HQ – Telephone**"	"2261111"	-
"**Place of Business – Address**"	No. 2 , Jalan Menteri Besar, Department of Labour	-
"**Place of Business – Postcode**"	BE6396	-
"**Place of Business – Building**"	RENTING - $5000	-
"**Place of Business – Telephone**"	"2261111"	-
"EMP ACC - Address"	No. 2 , Jalan Menteri Besar, Department of Labour	-
"**EMP ACC – Postcode**"	BE6396	-
"**EMP ACC – Building**"	SELF-OWNED	-
"**EMP ACC – Telephone**"	"2261111"	-
"**FACILITIES AVAILABLE**"	"Company Signage", "First Aid Kit", "Others (Please state) – SAFETY DOORS AND SECURITY SYSTEM"	Select any applicable options and if necessary , Applicant may select "Others" and Applicant may provide the information.

OPTIONAL FIELDS	SAMPLE	NOTES
"HQ – Email"	-	-
"HQ – Fax"	-	-
"HQ – Web site"	-	-

"Place of Business – Email"	*info@buruh.gov.bn*	-
"Place of Business – Fax"	*"2226111"*	-
"Place of Business – Web site"	*www.labour.gov.bn*	-
"EMP ACC – Email"	-	-
"EMP ACC – Fax"	-	-
"EMP ACC – Web site"	-	-

B. ADDRESS DETAILS TAB – SAMPLE COMPLETED TAB





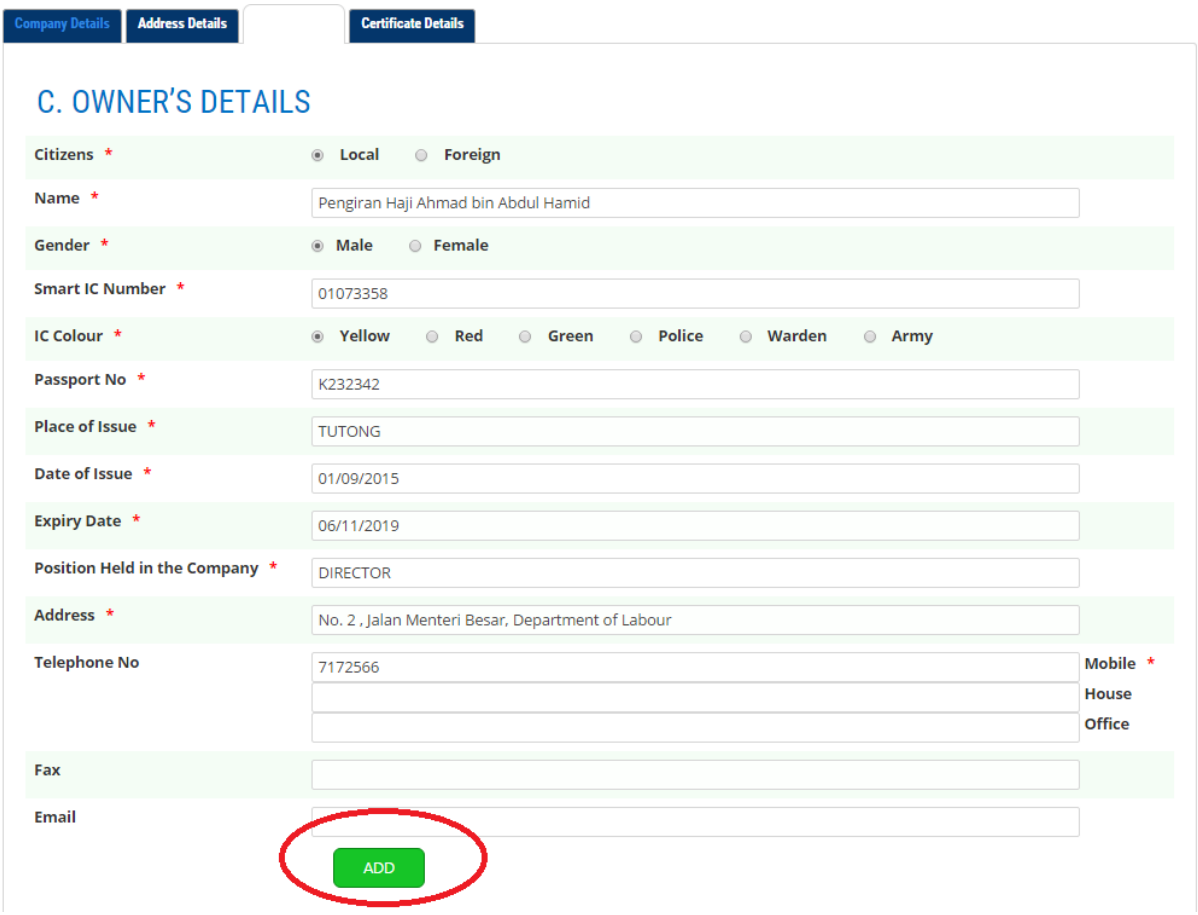
C. OWNER DETAILS TAB

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES

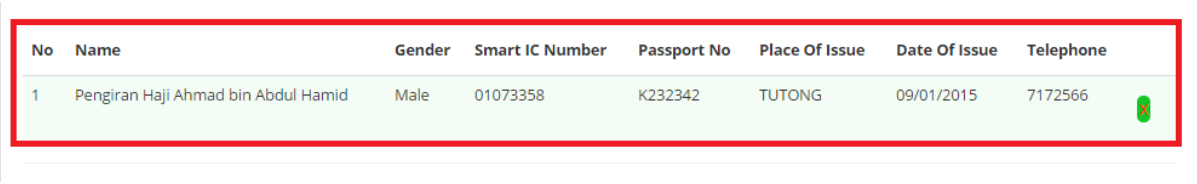
MANDATORY FIELDS	SAMPLE	NOTES
"**Citizenship**"	*Local*	*Please select one of the two available options.*
"**Name**"	*Pengiran Haji Ahmad bin Abdul Hamid*	*Please provide the "**full name**" of the owner.*
"**Gender"**	*Male*	*Please select the "Gender".*

"**Smart IC Number**"	*01073358*	*Please enter the ic number without "dash"*
"**IC Colour**"	*Yellow*	*Select from one of the options available.*
"**Passport No**"	*K2302390*	-
"**Place of Issue**"	*Brunei Darussalam*	-
"**Expiry Date**"	*09/01/2009*	*Day-Month-Year (DD/MM/YYYY)*
"**Position Held in the Company**"	*DIRECTOR*	-
"**Address**"	No. 2 , Jalan Menteri Besar, Department of Labour	-
"**Telephone No. – Mobile**"	*"7172566"*	-

OPTIONAL FIELDS	SAMPLE	NOTES
"**Telephone No. – House**"	*"2226111"*	-
"**Telephone No. – Office**"	*"2226111"*	-
"Fax"	*"2226111"*	-
"Email"	*haji.ahmad23@gmail.com*	-

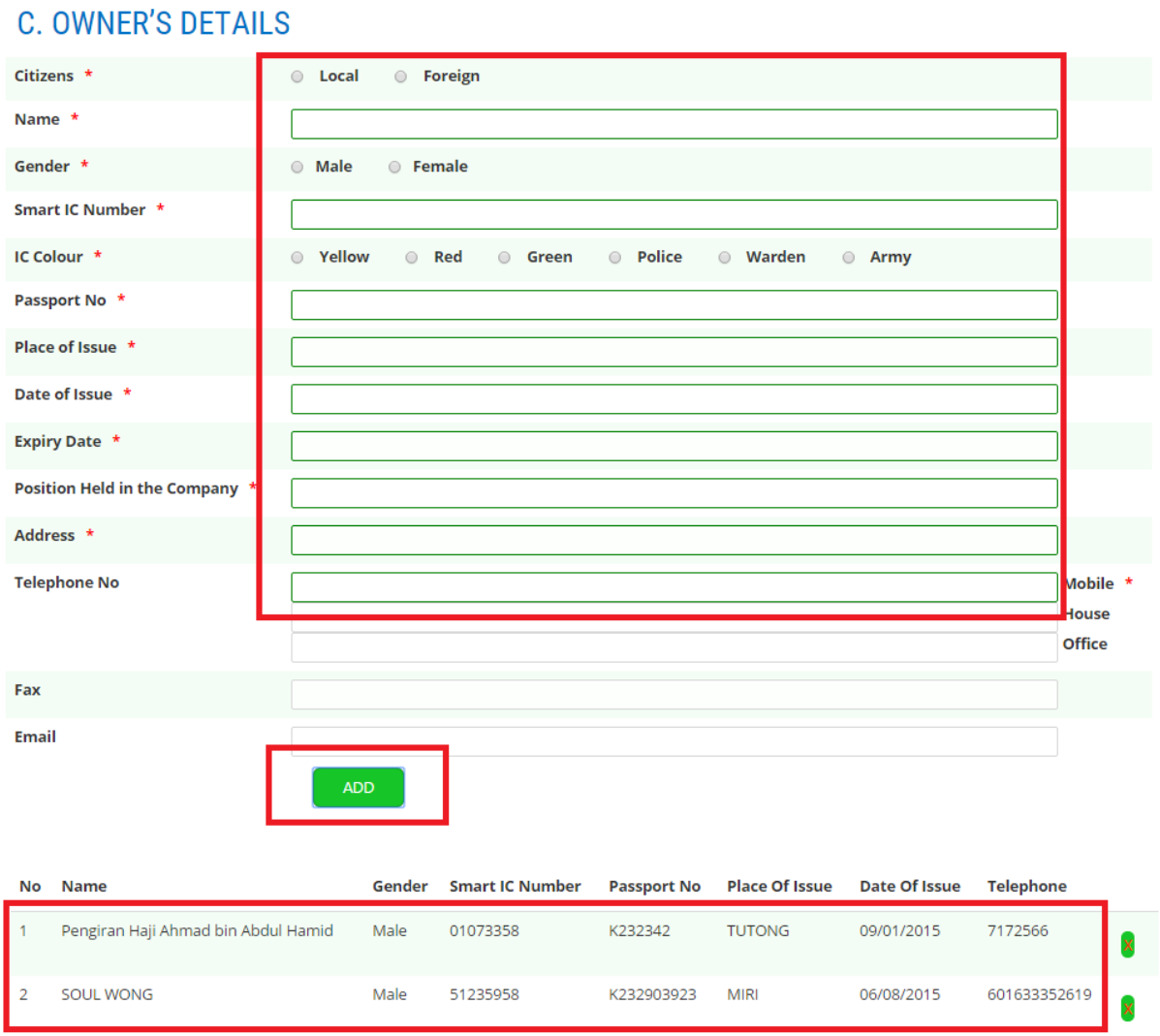


Provide complete all of the **mandatory information** requested and click "**Add**" to add the table.



No	Name	Gender	Smart IC Number	Passport No	Place Of Issue	Date Of Issue	Telephone
1	Pengiran Haji Ahmad bin Abdul Hamid	Male	01073358	K232342	TUTONG	09/01/2015	7172566

You may add more owner details by completing the fields again and click "**Add**".



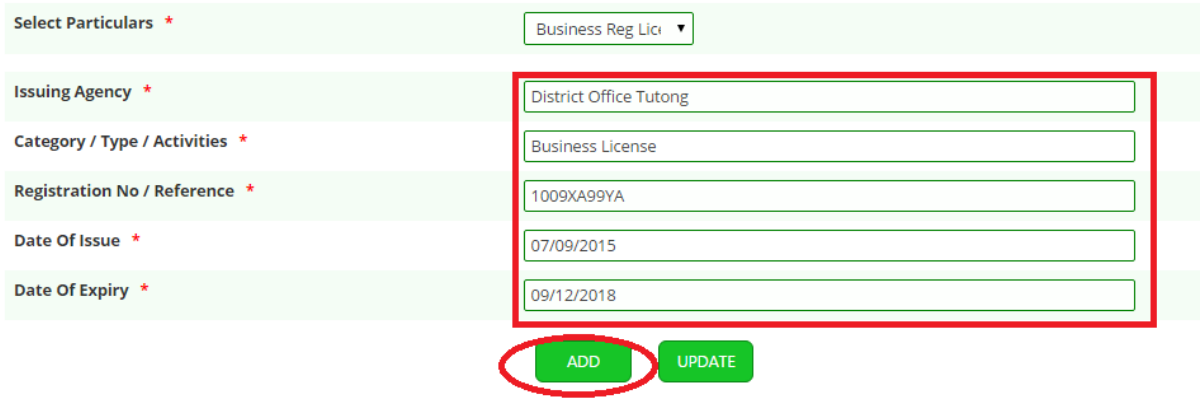
When ready, click "**Next**".

D. CERTIFICATE DETAILS TAB

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES, APPLICANT MUST PROVIDE ATLEAST **ONE** TYPE OF REGISTRATION/LICENSE/CERTIFICATE.

Please select **ONE** of the certificate Details available from the list provided and enter all of the information requested. Applicant may provide any **ADDITIONAL** certificate details **where appropriate and available.**

Example: Business Registration License



No	Particulars	Issuing Agency	Category / Type / Activities	Registration No	Date Of Issue	Date Of Expiry
1	Business Reg License	District Office Tutong	Business License	1009XA99YA	09/07/2015	12/09/2018
2	Travel Agent License					
3	Private Schooling and Tution					
4	Private Client Authority					
5	Internet Cafe License					
6	Fishery License					
7	Forestry Authorization					
8	Financial Institution Authority					
9	Contractor and Supplier Reg Certificate					
10	Agriculture Authorization					

Applicants can also change or update any **mistakes** or **errors** by selecting the certificate and re-entering the information and clicking "**Update**":

D. INFORMATION RELATED TO CERTIFICATES/ LETTERS OF PERMISSION/ COMPANY LICENSE AND REGISTRATION WITH OTHER GOVERNMENT AGENCIES

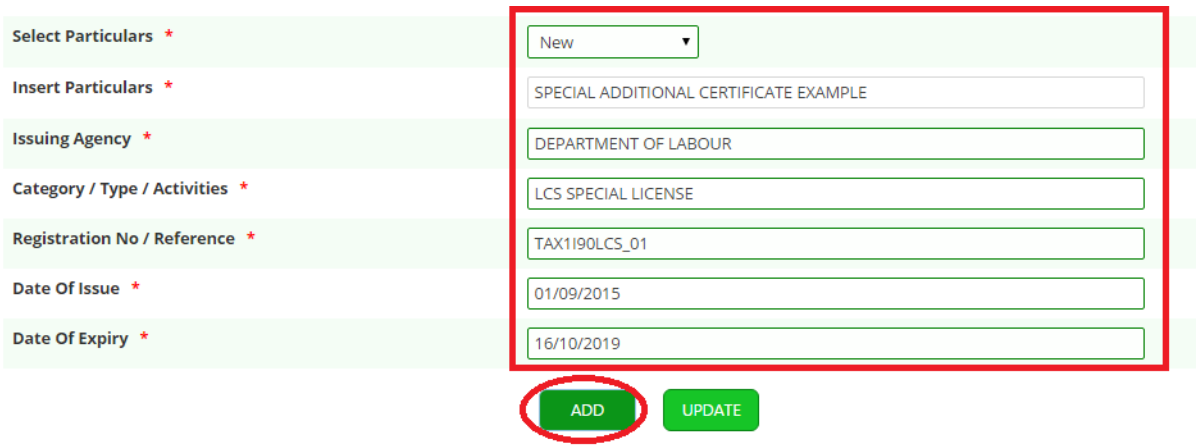
Select Particulars *	Business Reg Lic
Issuing Agency *	District Office Bandar
Category / Type / Activities *	Business License
Registration No / Reference *	1009XA99YA
Date Of Issue *	09/07/2015
Date Of Expiry *	12/09/2018

ADD UPDATE

No	Particulars	Issuing Agency	Category / Type / Activities	Registration No	Date Of Issue	Date Of Expiry
1	Business Reg License	District Office Tutong	Business License	1009XA99YA	09/07/2015	12/09/2018

No	Particulars	Issuing Agency	Category / Type / Activities	Registration No	Date Of Issue	Date Of Expiry
1	Business Reg License	District Office Bandar	Business License	1009XA99YA	07/09/2015	09/12/2018

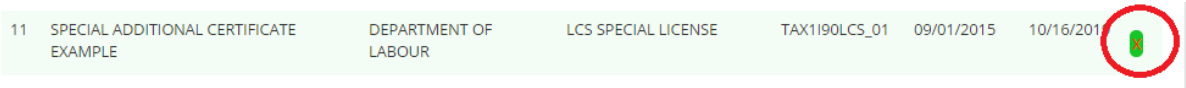
If the certificate is **NOT AVAILABLE** from the list provided, please select "**NEW**" and enter all of the requested information.



This will add the newly entered information of the "**Certificate**" into the table shown below:

No	Particulars	Issuing Agency	Category / Type / Activities	Registration No	Date Of Issue	Date Of Expiry
1	Business Reg License	District Office Tutong	Business License	1009XA99YA	09/07/2015	12/09/2018
2	Travel Agent License					
3	Private Schooling and Tution					
4	Private Client Authority					
5	Internet Cafe License					
6	Fishery License					
7	Forestry Authorization					
8	Financial Institution Authority					
9	Contractor and Supplier Reg Certificate					
10	Agriculture Authorization					
11	SPECIAL ADDITIONAL CERTIFICATE EXAMPLE	DEPARTMENT OF LABOUR	LCS SPECIAL LICENSE	TAX1I90LCS_01	09/01/2015	10/16/2019

Applicants may also remove any of these additional certificates by clicking on "**X**"



When the Applicant is ready and satisfied with all the entered information, they may click "**Submit**".

The Applicant now must wait for a Labour officer or Labour LCS IT HELPDESK staff to **approve** their **Company Registration** form **before** they may **proceed** with **other Applications submissions** on LCS such as Foreign Worker's License (Quota) Application and others.

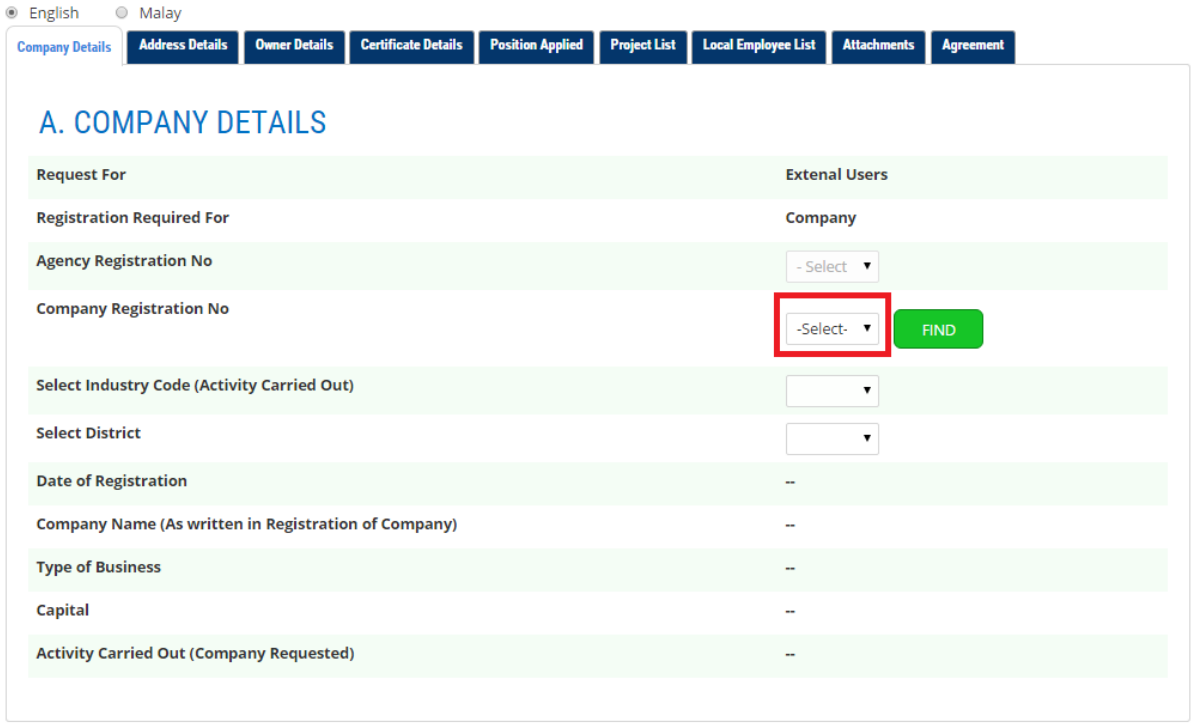
3.3 FOREIGN WORKER LICENSE (QUOTA) APPLICATION FORM

THIS FORM IS **ONLY APPLICABLE** TO **COMPANIES** USING LCS TO APPLY FOR FOREIGN WORKER LICENSE (QUOTA) APPLICATION **AFTER** THEY HAVE **REGISTERED SUCCESSFULLY** USING THE **COMPANY REGISTRATION** FORM AND HAS BEEN **APPROVED**.

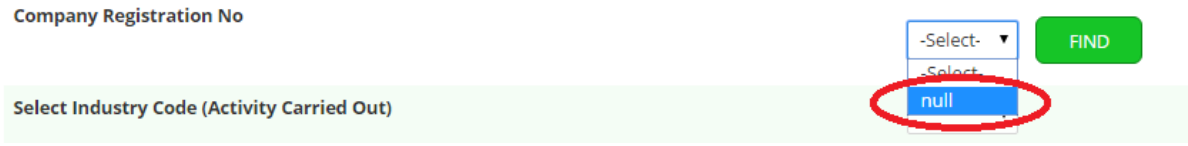
A. COMPANY DETAILS TAB

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES

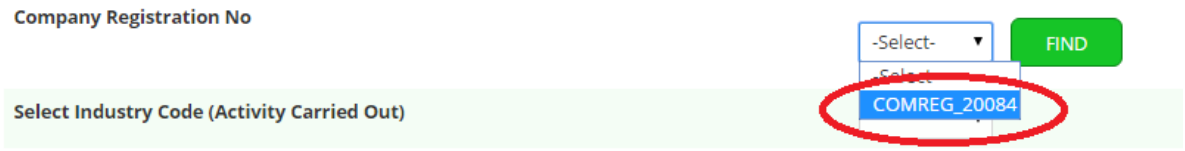
(i) Applicant must select their "**Company Registration No.**" And click "**Find**":



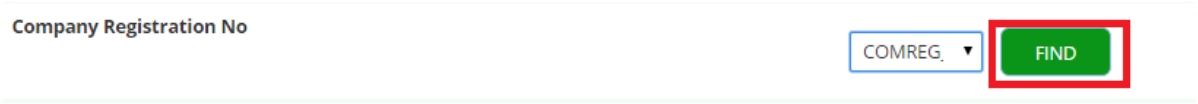
(ii) IF the applicant CANNNOT SEE their Company Registration Number or "**null**", it means that their Company Registration on LCS has **NOT BEEN APPROVED** yet.



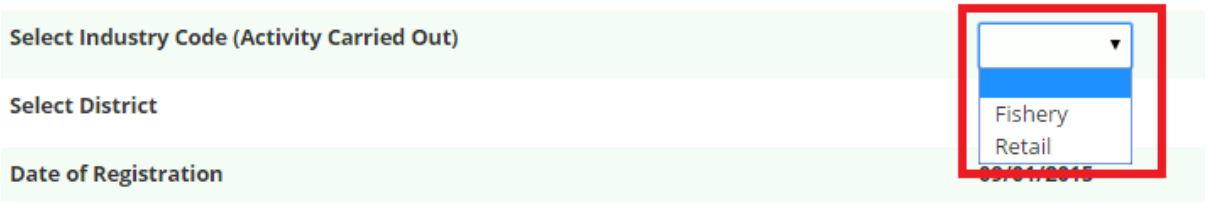
(iii) IF the applicant CAN SEE their Company Registration Number, it means that their Company Registration on LCS has **BEEN APPROVED** and they may proceed with the application:



(iv) **Select** on the "**Registration Number**" and Click "**Find**".



(v) Applicant **MUST** select the **type** of Business **Industry / Activity** that this **Quota** to be APPLIED will be used for:



(vi) Applicant **MUST** state the **DISTRICT** where the Business will be operating with this **Quota**:

(vii) When Applicant have selected the **Industry Code** and **District**, applicant may click "**Next**".

B. ADDRESS DETAILS TAB

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **ADDRESS DETAILS** REGISTERED PREVIOUSLY USING THE COMPANY REGISTRATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

B. DETAILS OF ADDRESS OF OFFICE / BUSINESS / ENTERPRISE / ACCOMMODATION

1. HEADQUARTER

1.1 Address	No. 2 , Jalan Menteri Besar, Department of Labour		
Post code	BE6396		
1.2 Building	Self Owned		
1.3 Telephone	2261111	Email (If applicable)	None
Fax	None	Web site (If applicable)	None

2. PLACE OF BUSINESS

2.1 Address	No. 2 , Jalan Menteri Besar, Department of Labour		
Post code	BE6396		
2.2 Building	Rent - B$ 5000		
2.3Telephone	2261111	Email (If applicable)	None
Fax	None	Web site (If applicable)	None

3. EMPLOYEE ACCOMMODATION

3.1 Address	No. 2 , Jalan Menteri Besar, Department of Labour		
Post code	BE6396		
3.2 Building	Self Owned		
3.3 Telephone	2261111	Email (If applicable)	None
Fax	None	Web site (If applicable)	None

4. FACILITIES AVAILABLE

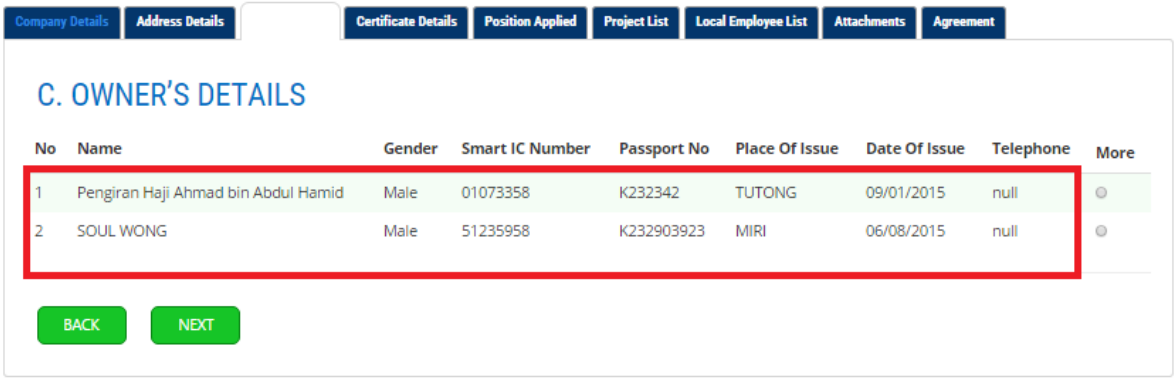
Checklist of Preparations List	Company Signage, First Aid Kit, Others - ,

Click on "**Next**" when ready:

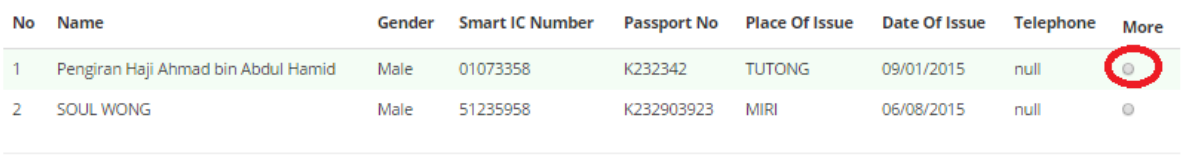
C. OWNER DETAILS TAB

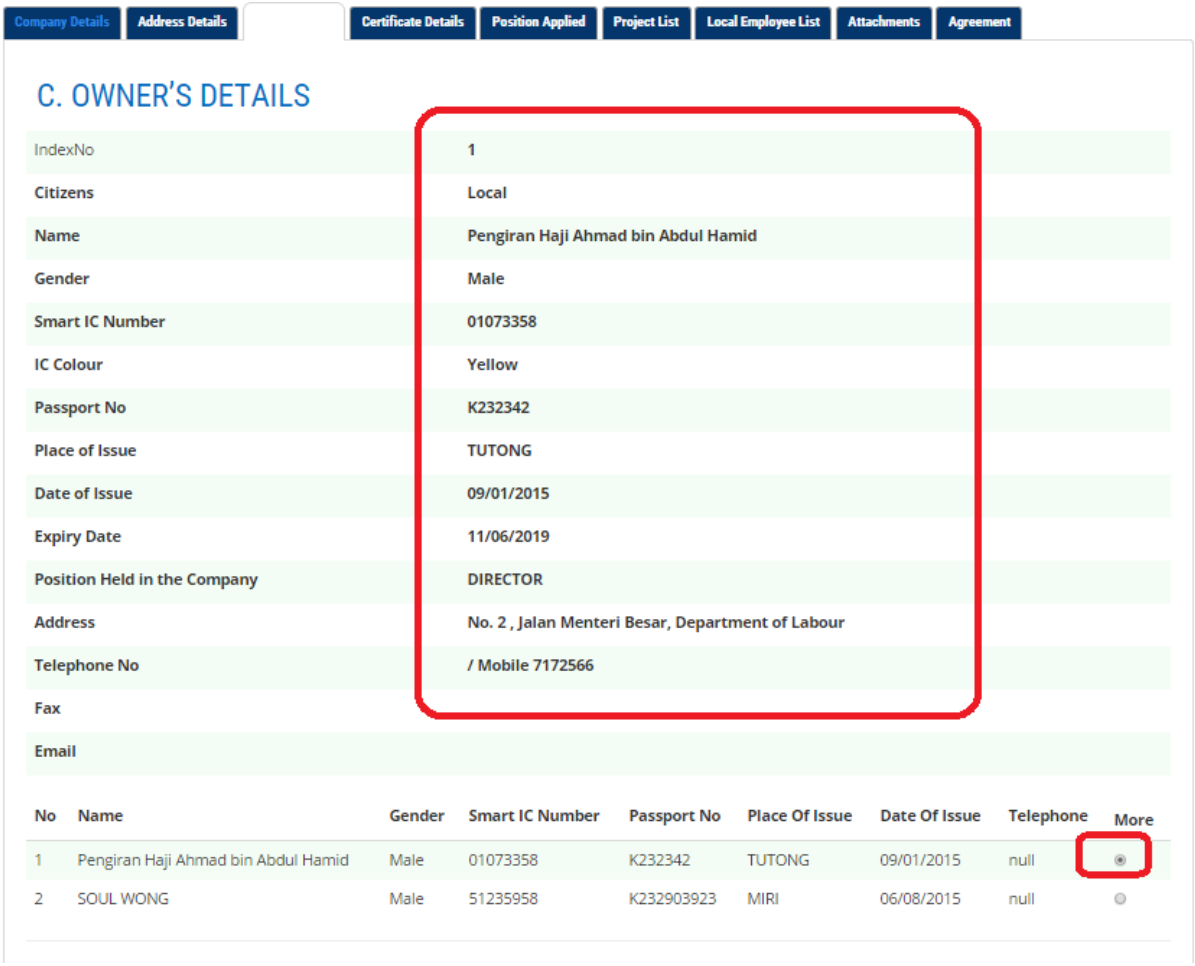
IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **OWNER'S DETAILS** REGISTERED PREVIOUSLY USING THE COMPANY REGISTRATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.



Applicant may click on "**More**" to expand more details of the **Owner Details**.



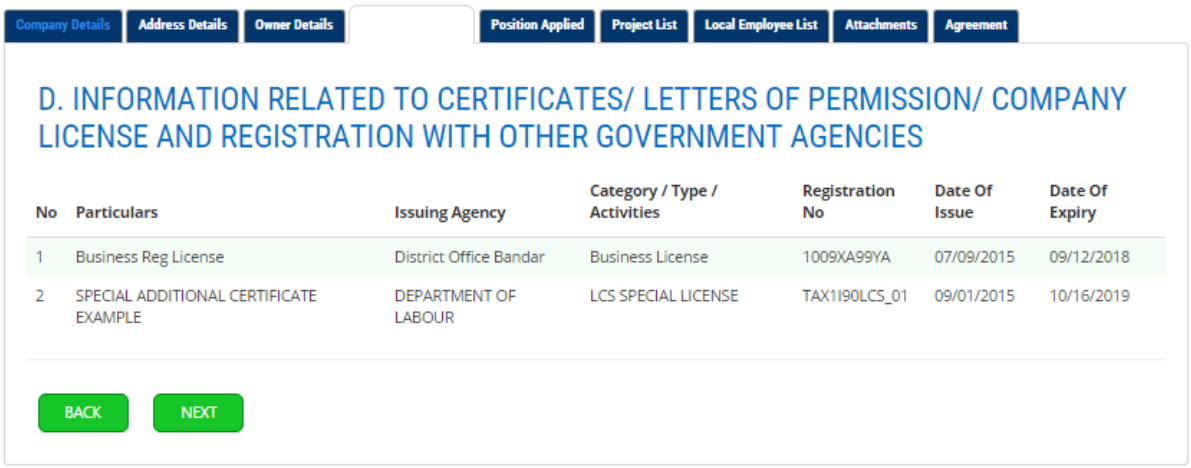


Click on "**Next**" when ready:

D. CERTIFICATE DETAILS

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **CERTIFICATE'S DETAILS** REGISTERED PREVIOUSLY USING THE COMPANY REGISTRATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

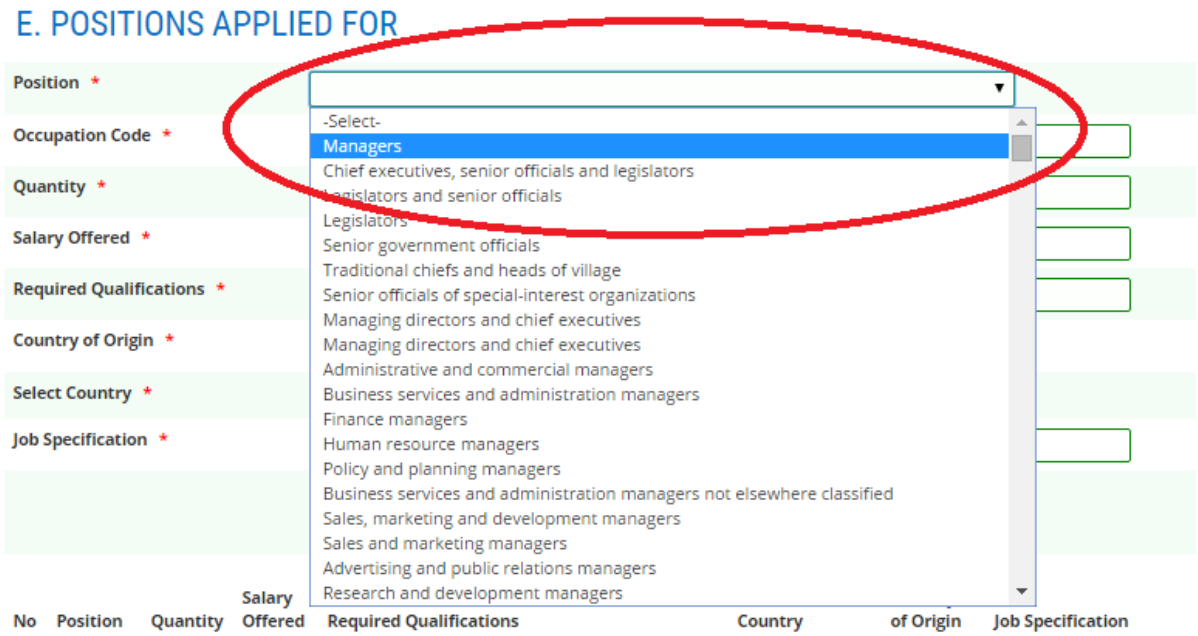


Click on "**Next**" when ready:

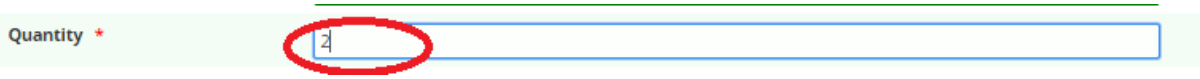
E. POSITIONS APPLIED FOR

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES.

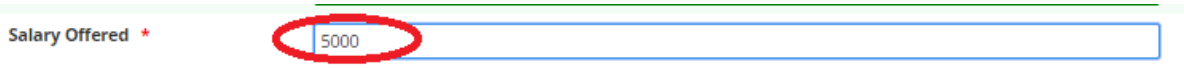
(i) Select "**Position**".



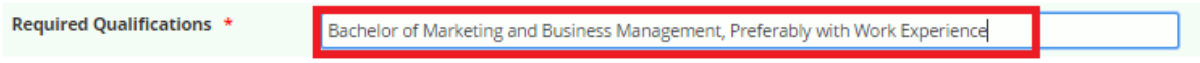
(ii) Provide "**Quantity**".



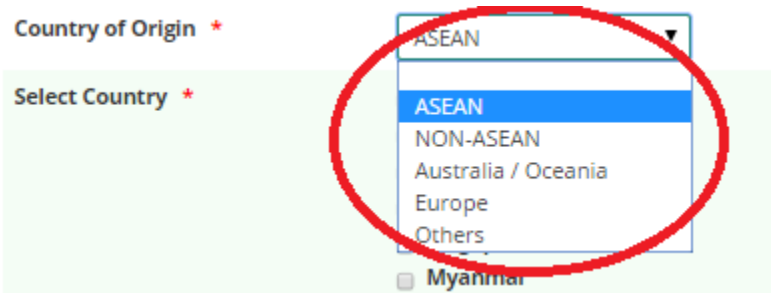
(iii) State "**Salary Offered**".



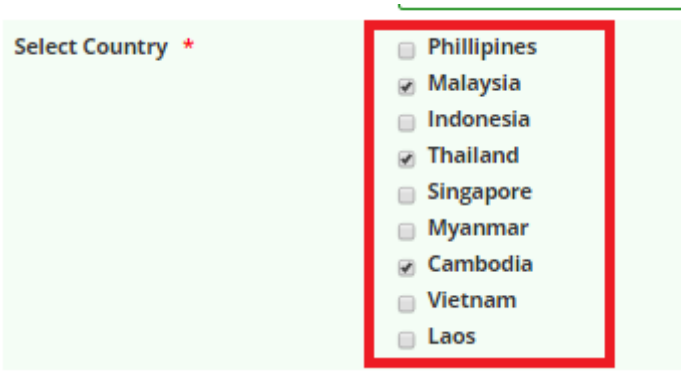
(iv) Provide "**Required Qualifications**" Description.



(v) Select "**Country of Origin**".

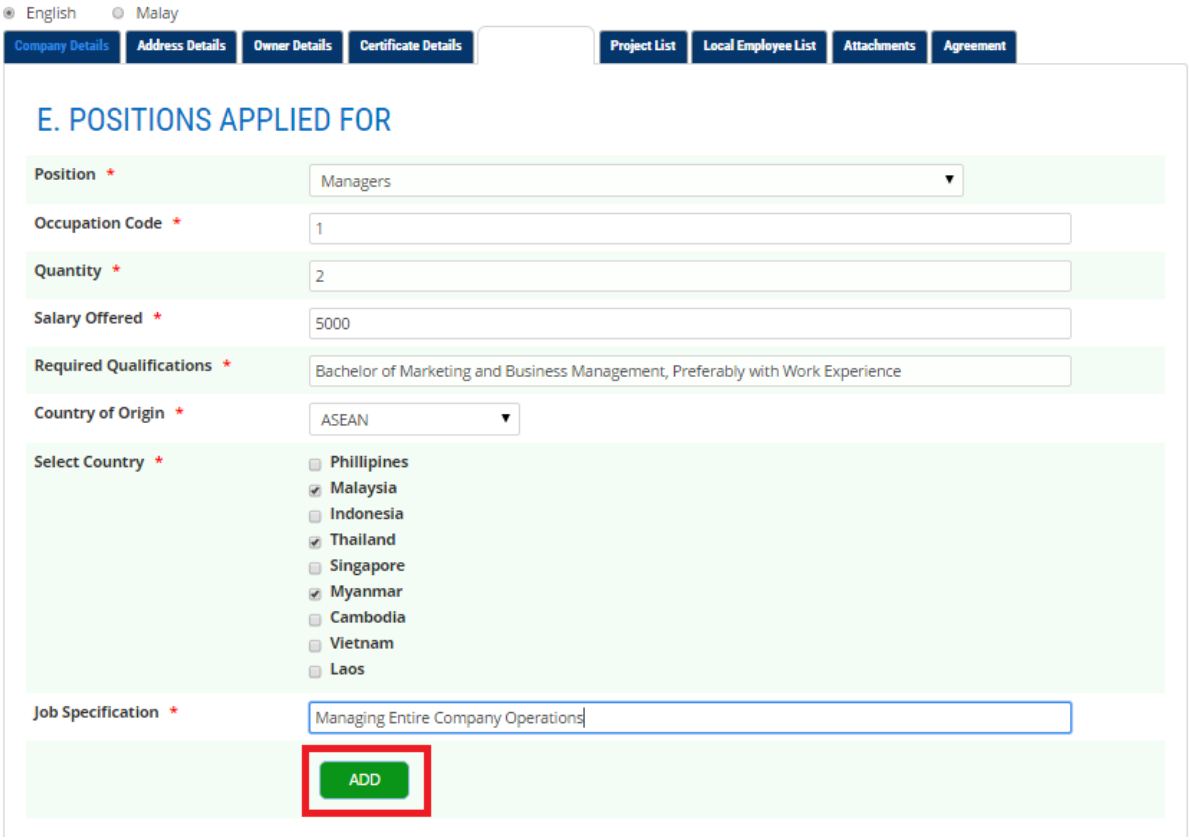


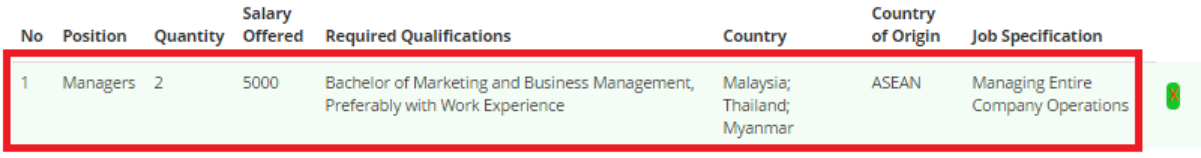
(v) Select "**Country**" from the List provided.



(vi) Provide "**Job Specification**" Description.

(vii) Click "**Add**".





No	Position	Quantity	Salary Offered	Required Qualifications	Country	Country of Origin	Job Specification	
1	Managers	2	5000	Bachelor of Marketing and Business Management, Preferably with Work Experience	Malaysia; Thailand; Myanmar	ASEAN	Managing Entire Company Operations	X

Applicant may aso **REPEAT** the above process for multiple "**Quota**" Positions to be applied.

No	Position	Quantity	Salary Offered	Required Qualifications	Country	Country of Origin	Job Specification	
1	Managers	2	5000	Bachelor of Marketing and Business Management, Preferably with Work Experience	Malaysia; Thailand; Myanmar	ASEAN	Managing Entire Company Operations	X
2	Applications programmers	1	2500	Bachelor of Computer Science	Australia	Australia / Oceania	Programming for in-house applications Development	X
3	Finance managers	1	3500	Bachelor of Finance	Germany	Europe	Managing the Finance side of the business	X

Applicant may click on "**X**" to remove any **mistakes** or **errors**.

No	Position	Quantity	Salary Offered	Required Qualifications	Country	Country of Origin	Job Specification
1	Managers	2	5000	Bachelor of Marketing and Business Management, Preferably with Work Experience	Malaysia; Thailand; Myanmar	ASEAN	Managing Entire Company Operations
2	Applications programmers	1	2500	Bachelor of Computer Science	Australia	Australia / Oceania	Programming for in-house applications Development
3	Finance managers	1	3500	Bachelor of Finance	Germany	Europe	Managing the Finance side of the business

(ix) Click on "**Next**" when applicant is satisfied with the information entered.

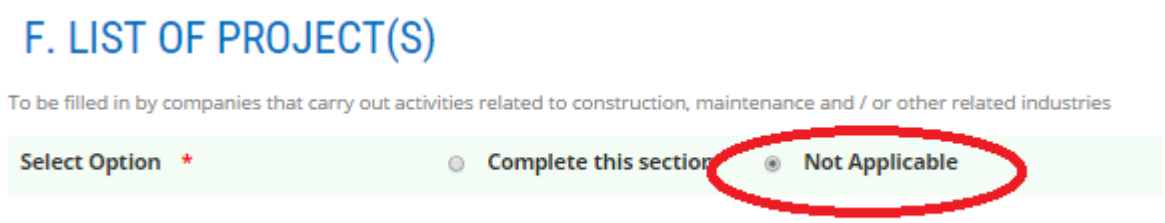
MANDATORY FIELDS	SAMPLE	NOTES
"**Position"**	*Managers*	*Select from the choices available*
"**Occupation Code**"	*Non-selectable*	*Cannot be selected*
"**Quantity"**	*"2"*	*Number of Quota to be Applied for this position*
"**Salary Offered**"	*"5000"*	*Salary without the "$" the dollar sign.*
"**Required Qualifications**"	*Bachelor of Marketing and Business Management, Preferably with Work Experience.*	*Academic or Ceritifcations, applicant may choose to add Description.*
"**Country of Origin**"	*"ASEAN"*	*Select from the Options Available*
"**Select Country**"	*Malaysia, Thailand, Myanmar*	*Select ONE or MULTIPLE Options Available.*
"**Job Specifications**"	*Managing Entire Company Operations*	*Provide a brief description of the Job.*

OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-

F. PROJECT LIST

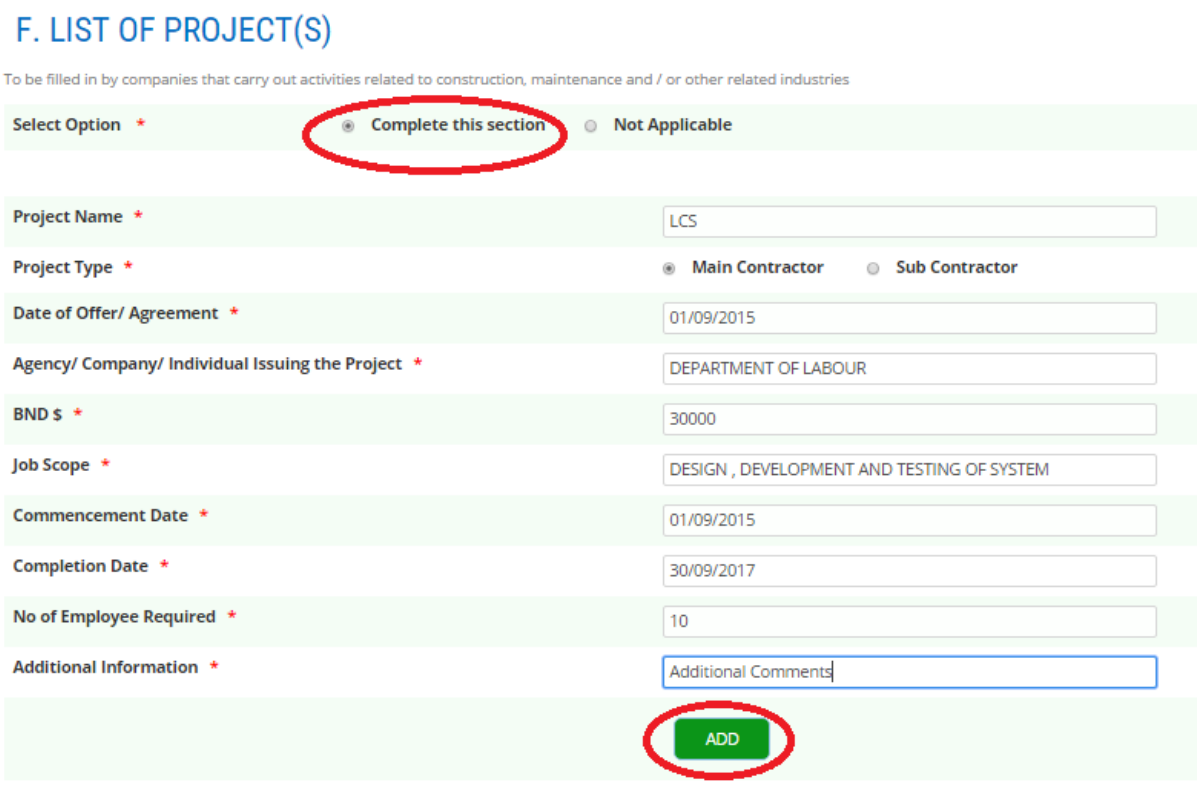
THIS TAB IS **ONLY APPLICABLE** TO APPLICANTS WHOM HAVE **ANY PREVIOUS OR EXISTING PROJECTS AND COMPANIES RELATED TO CONSTRUCTION, MAINTENANCE OR PROJECTS-BASED COMPANIES**.

IF Applicant **DOES NOT** wish to enter information in this tab, they must Select "**Not Applicable**";

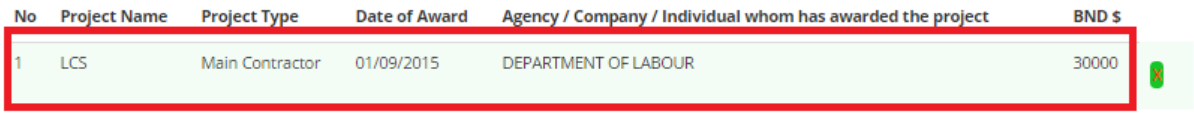


OR

otherwise, Applicant must select "**Complete this section**" and provide all of the information requested.



Click "**Add**" to add the project to the list of projects table.



No	Project Name	Project Type	Date of Award	Agency / Company / Individual whom has awarded the project	BND $
1	LCS	Main Contractor	01/09/2015	DEPARTMENT OF LABOUR	30000

Applicant **may add more projects** to the list by **re-entering** information into **the fields** and clicking on "**Add**".

No	Project Name	Project Type	Date of Award	Agency / Company / Individual whom has awarded the project	BND $
1	LCS	Main Contractor	01/09/2015	DEPARTMENT OF LABOUR	30000
2	LCS 2	Sub Contractor	01/09/2015	DEPARTMENT OF IMMIGRATION	20000

LIST OF PROJECT

Reminder :Scope of project must be completed to alllow application to be considered.

Applicant may click on "**X**" to remove any **mistakes** or **errors**.

No	Project Name	Project Type	Date of Award	Agency / Company / Individual whom has awarded the project	BND $
1	LCS	Main Contractor	01/09/2015	DEPARTMENT OF LABOUR	30000

Remove

Reminder :Scope of project must be completed to alllow application to be considered.

Click on "**Next**" when applicant is satisfied with the information entered.

MANDATORY FIELDS	SAMPLE	NOTES
"**Project Name"**	*LCS Project*	*Name of the Project*
"**Project Type**"	*Main Contractor*	*Select from one of two available options*
"**Date of Offer / Agreement"**	*09/01/2009*	*Day-Month-Year (DD/MM/YYYY)*
"**Agency/Company/Individual Issuing the Project**"	*"5000"*	*Name of the Project's Client*
"**BND$**"	*30000*	*Provide the Project Value without the "$" dollar sign.*
"**Job Scope**"	*DESIGN, DEVELOPMENT AND TESTING OF THE SYSTEM*	*Provide the scope of work done in this Project*
"**Commencement Date**"	*09/01/2009*	*Day-Month-Year (DD/MM/YYYY)*
"**Completion Date**"	*09/01/2009*	*Day-Month-Year (DD/MM/YYYY)*
"**No of Employee Required**"	*"10"*	*An estimated number of manpower involved in this project*

"**Additional Information**"	*Any Additional Comments.*	*Applicant MUST provide additional description or details regarding this project*

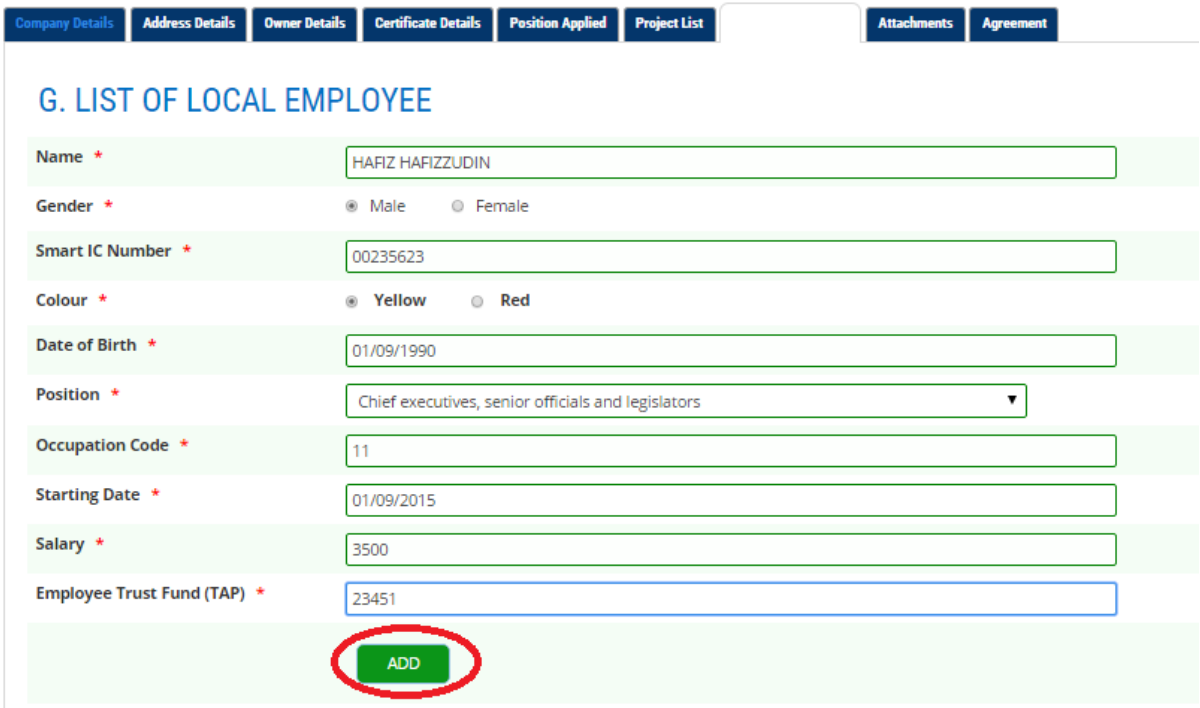
OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-

G. LOCAL EMPLOYEE LIST

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES.

Applicant **MUST** provide a **minimum** of ONE LOCAL employee, which **can be a LOCAL owner**.

Applicant **must provide** all of information in the requested fields and click on "**Add**" to add the employee to the List of Local Employees table.



No	Name	Gender	IC No	Colour	Date of Birth	Position	Start Date	Salary	Tap No
1	HAFIZ HAFIZZUDIN	Male	00235623	Yellow	01/09/1990	Managing directors and chief executives	01/09/2015	3500	23421

Applicant **may add more local employees** to the list by **re-entering** information into **the fields** and clicking on "**Add**".

No	Name	Gender	IC No	Colour	Date of Birth	Position	Start Date	Salary	Tap No
1	HAFIZ HAFIZZUDIN	Male	00235623	Yellow	01/09/1990	Managing directors and chief executives	01/09/2015	3500	23421
2	NAZIRUL BIN HAJI AHMAD	Male	00235623	Yellow	01/09/1990	Chief executives, senior officials and legislators	01/09/2015	3500	23451

Applicant may click on "**X**" to remove any **mistakes** or **errors**.

No	Name	Gender	IC No	Colour	Date of Birth	Position	Start Date	Salary	Tap No
1	HAFIZ HAFIZZUDIN	Male	00235623	Yellow	01/09/1990	Managing directors and chief executives	01/09/2015	3500	23421

Click on "**Next**" when applicant is satisfied with the information entered.

MANDATORY FIELDS	SAMPLE	NOTES
"**Name**"	*HAFIZ HAFIZZUDIN*	*Please provide the full name of the owner.*
"**Gender"**	*Male*	*Please select the Gender.*
"**Smart IC Number**"	*002353623*	*Please enter the ic number without "dash"*
"**Colour**"	*Yellow*	*Select from one of the options available.*

"**Date of Birth**"	*01/09/1990*	*Day-Month-Year (DD/MM/YYYY)*
"**Position"**	*Chief Executives, Senior Officials and Legilsators*	*Please select from the options available.*
"**Occupation Code**"	*Cannot be selected*	*Cannot be selected*
"**Starting Date**"	*09/01/2009*	*Day-Month-Year (DD/MM/YYYY)*
"**Salary**"	*3000*	*Numbers Only (without the $ dollar sign)*
"**Employee Trust Fund(TAP)**"	*23451*	*Numbers Only*

OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-

H. ATTACHMENTS

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES.

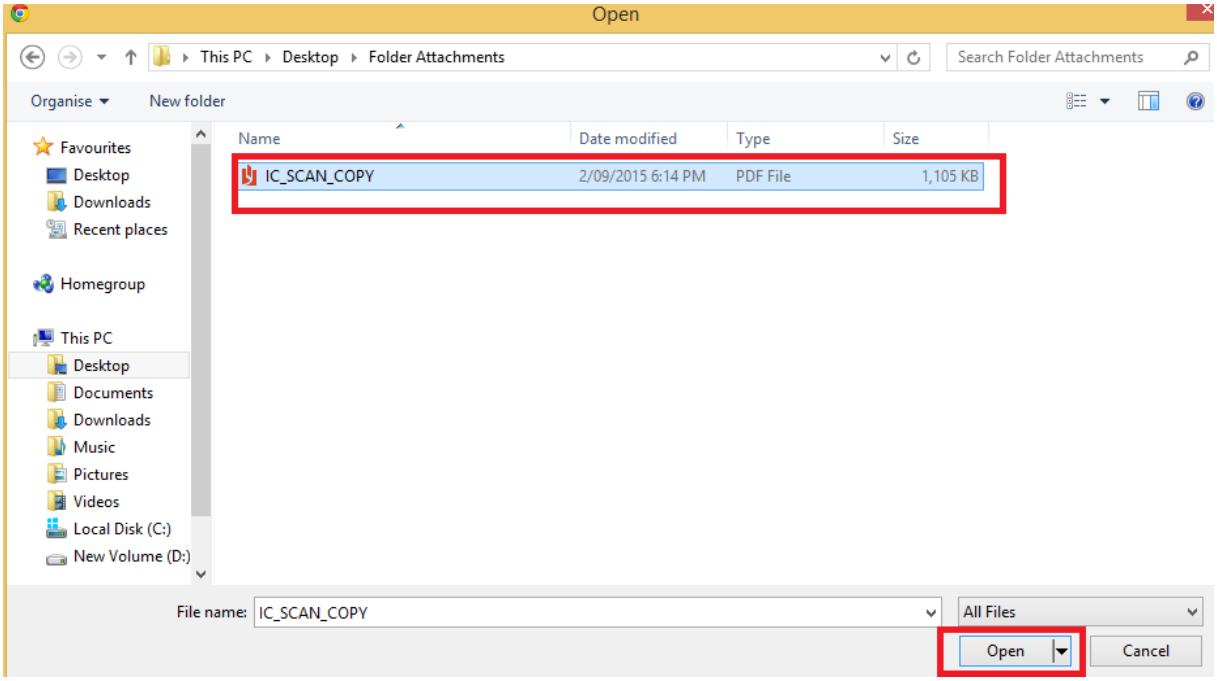
In this tab, Applicant **MUST** attach **ALL** of the **STATED** documentations.

HOW TO ATTACH FILES:

Example: To Attach a "Valid Copies of the applicant's and his/her spouse's identity cards"

Click "**Choose File**":

Locate the scanned copy of Applicant's **"Valid Copies of applicant's and his/her spouse's identity cards", SELECT** it once and click "**OPEN**".

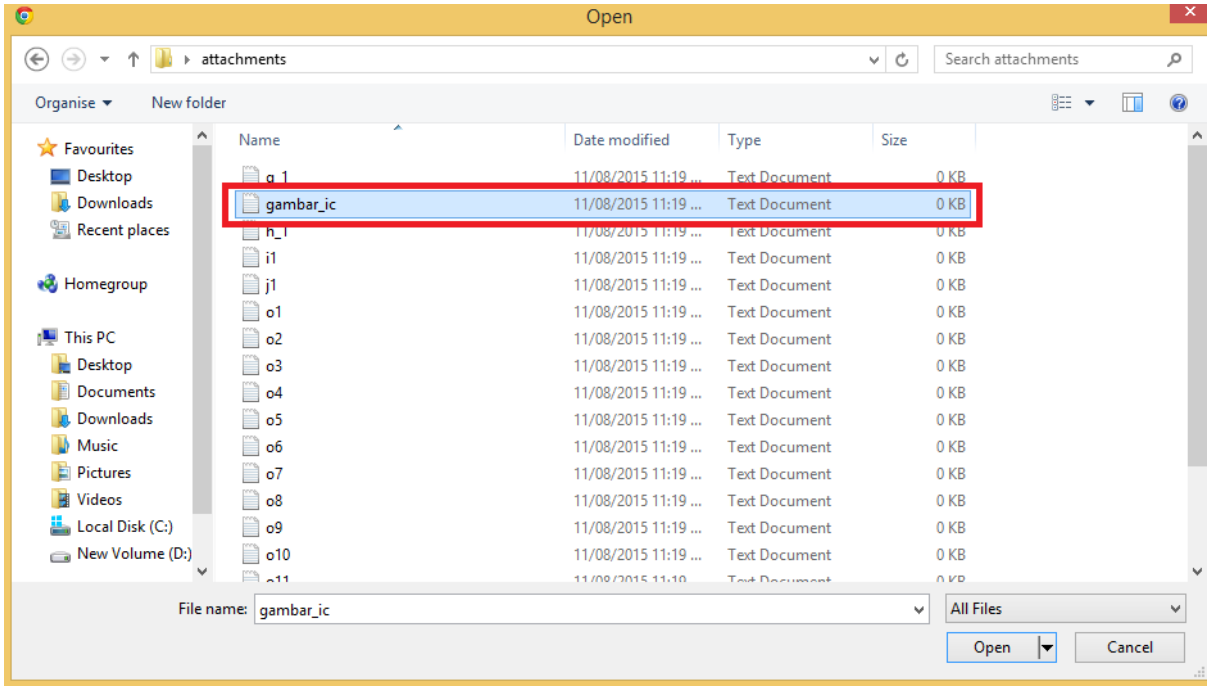


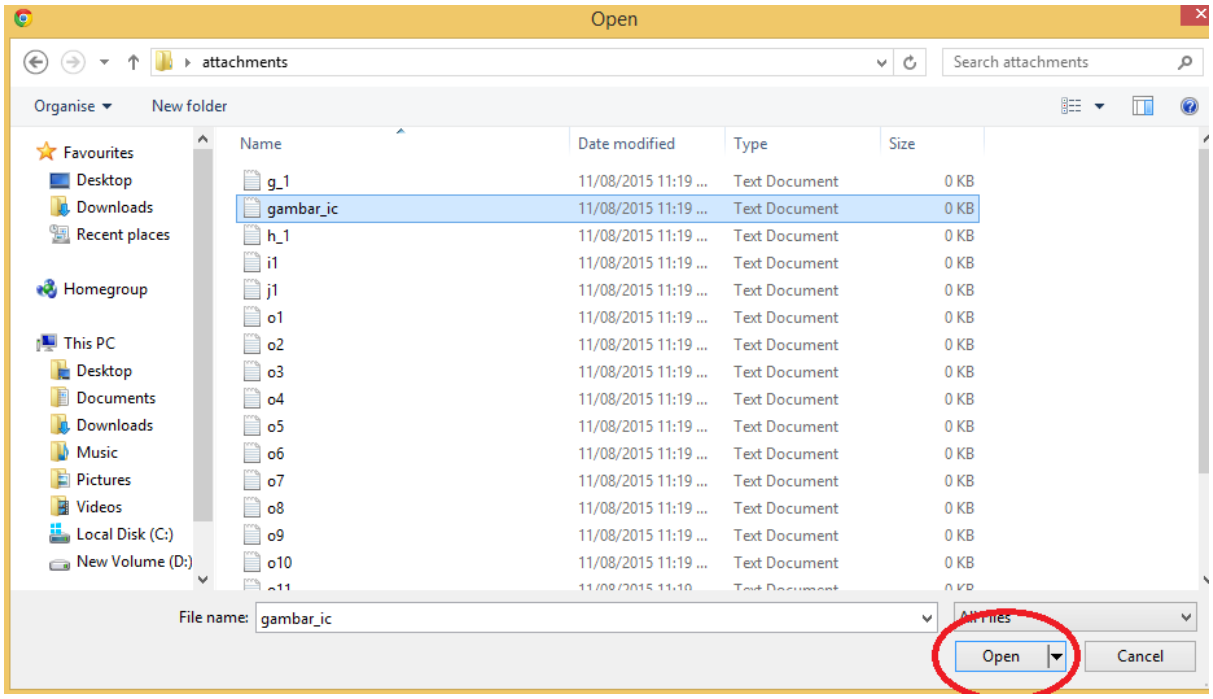
Applicant may verify if they have attached the correct file by looking at the name of the file:

ADDITIONAL DOCUMENTATIONS

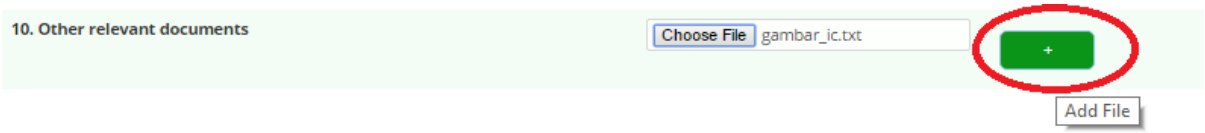
To **Add** or **Attach** any **ADDITIONAL** documentations or attachments **NOT SPECIFIED** on the list , applicants may go to "**10. Other Relevant Documents**" and Click on "**Choose File**".

Locate the **folder** where the **File** is saved and **Find** the file to be **attached.**

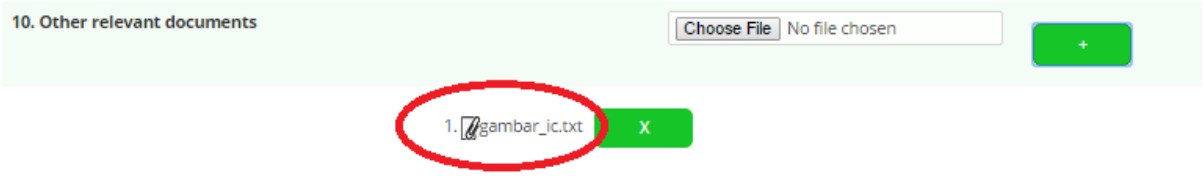




Once applicant has selected "**Open**" in the Browser window, applicant should click on the "**+**" sign button.



If the **applicant** has **succesfully** attached the **file**, the **name** of the **file** will show up as shown below:



To **remove** any **mistakes** or errors, applicant may also click on "**X**" to remove the **attachment**.

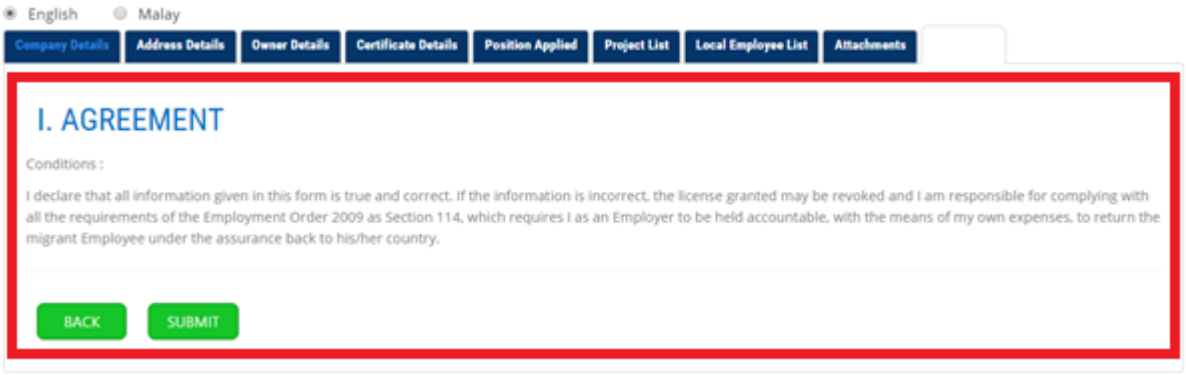
Click on "**Next**" when applicant is satisfied with the attachments selected.

REMINDERS FOR ATTACHMENTS:

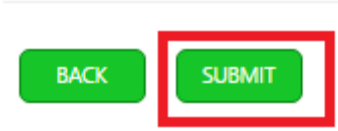
- Do not use the "**SAME**" FILE NAME for different attachments
- PLEASE avoid using "**Special Characters**" or "**Symbols**" for Applicant's file names (!@#$%^&*), but Applicant may use underscores " _ ".
- PLEASE PROVIDE the **Mandatory ATTACHMENTS**, and **if AVAILABLE**, provide the **Optional ATTACHMENTS** for a higher chance of success at applying.
- An example format shown below for Applicant's file names:
  "**IC_SCAN_COPY_APPLICANT_1**"
  "**BUR555_APPLICANT_SPOUSE**"

I. AGREEMENT

IN THIS TAB, APPLICANT **MUST CAREFULLLY READ** ALL THE **TERMS AND CONDITIONS** SET OUT BY THE DEPARTMENT OF LABOUR FOR PROCESSING THIS APPLICATION.



By Clicking "**SUBMIT**", Applicants **AGREE** to all of these **TERMS AND CONDITIONS** and the Application will be submitted for Processing.



3.6 WORKPASS RECOMMENDATION FORM

THIS FORM IS **ONLY APPLICABLE** TO **EMPLOYMENT AGENCIES** WHO CAN APPLY ON BEHALF OF COMPANIES WHOSE FOREIGN WORKER'S LICENSE (QUOTA) HAS BEEN **APPROVED.**

COMPANIES MAY ONLY APPLY FOR RENEWAL OF WORKPASS RECOMMENDATION.

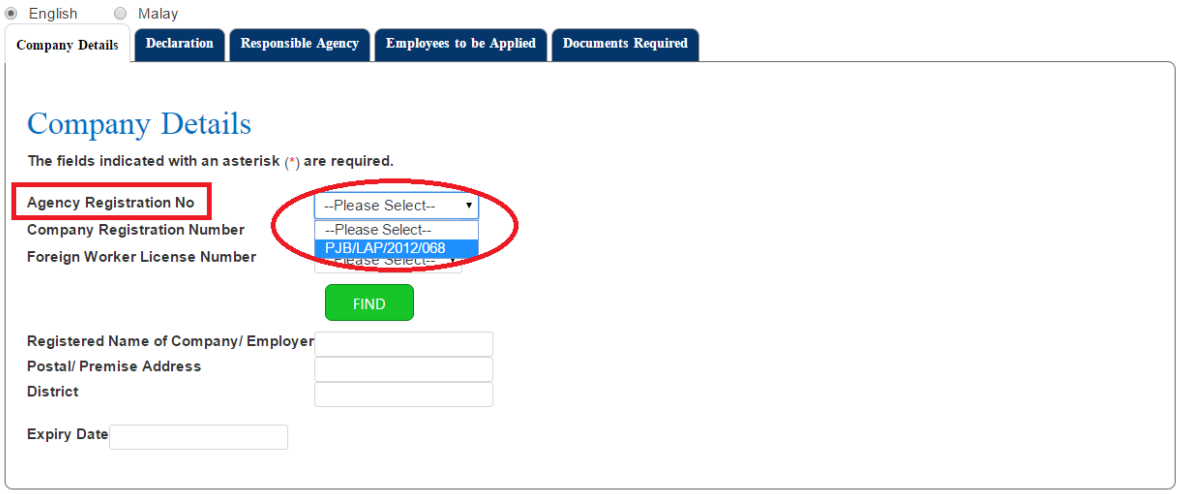
A. COMPANY DETAILS TAB

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **CERTIFICATE'S DETAILS** REGISTERED PREVIOUSLY USING THE COMPANY REGISTRATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

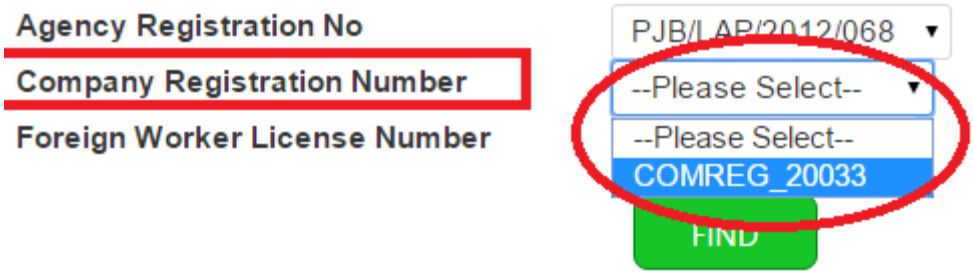
IF applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

EXPIRY DATE OF LICENSE CANNOT BE CHANGED.

(i) Employment Agencies **MUST** select their **AGENCY** License Number.



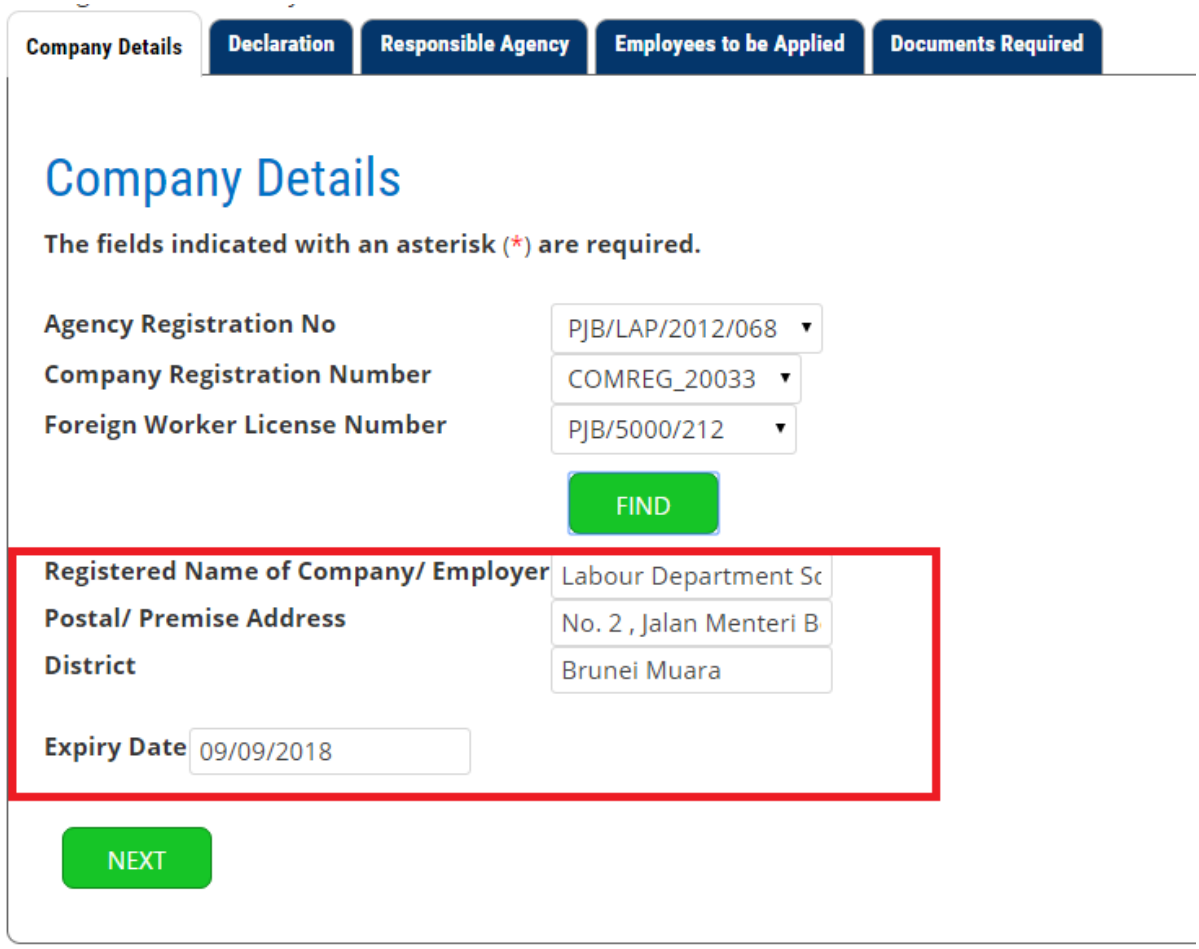
(ii) The Agency can then look up the list of "**COMPANIES**" whom have **SELECTED** or **NOMINATED** them to apply on their **behalf**.



(iii) Select the "**PJB**" or **Quota License Number** to Process the Work Pass Recommendation Application.

(iv) Click on "**Find**".

(v) Applicant must **VERIFY** that the Application details are correct such as the "**Registered Name of the Company**", "**Postal/Premise Address**" and "District".

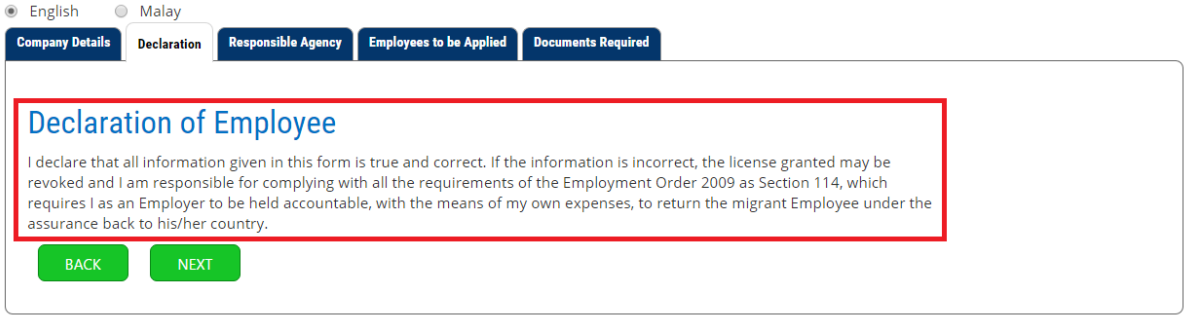


Click on "**Next**" when applicant has **VERIFIED** that the information retrieved is correct.

B. DECLARATION TAB

IN THIS TAB, APPLICANT **MUST CAREFULLLY READ** ALL THE **TERMS AND CONDITIONS** SET OUT BY THE DEPARTMENT OF LABOUR FOR PROCESSING THIS APPLICATION.

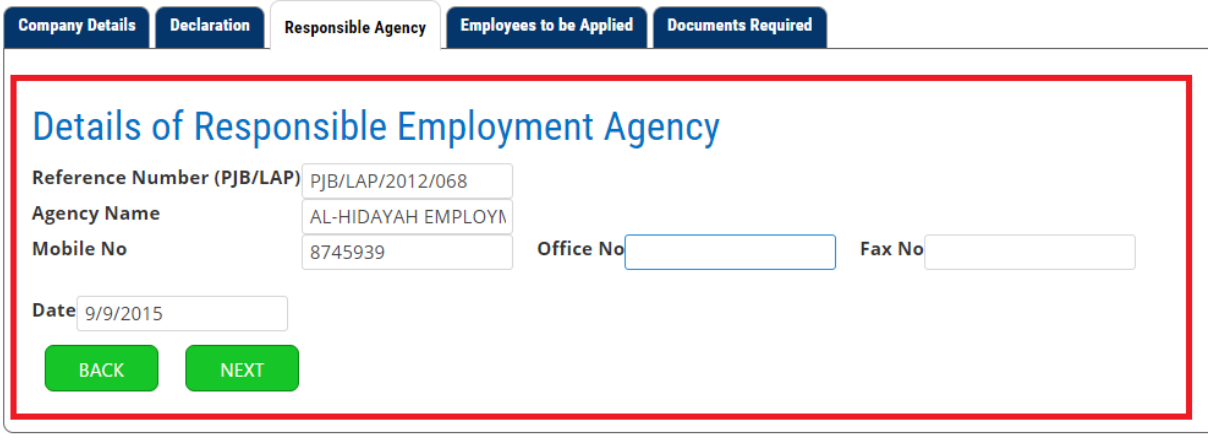
By Clicking "**NEXT**", Applicants **AGREE** to all of these **TERMS AND CONDITIONS** to be applied when processing this application.



C. RESPONSIBLE AGENCY TAB

IN THIS TAB, THE EMPLOYMENT AGENCY WILL BE ABLE TO **REVIEW** THEIR CONTACT DETAILS BUT THE EMPLOYMENT AGENCY **MAY NOT EDIT** THESE DETAILS.

IF applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

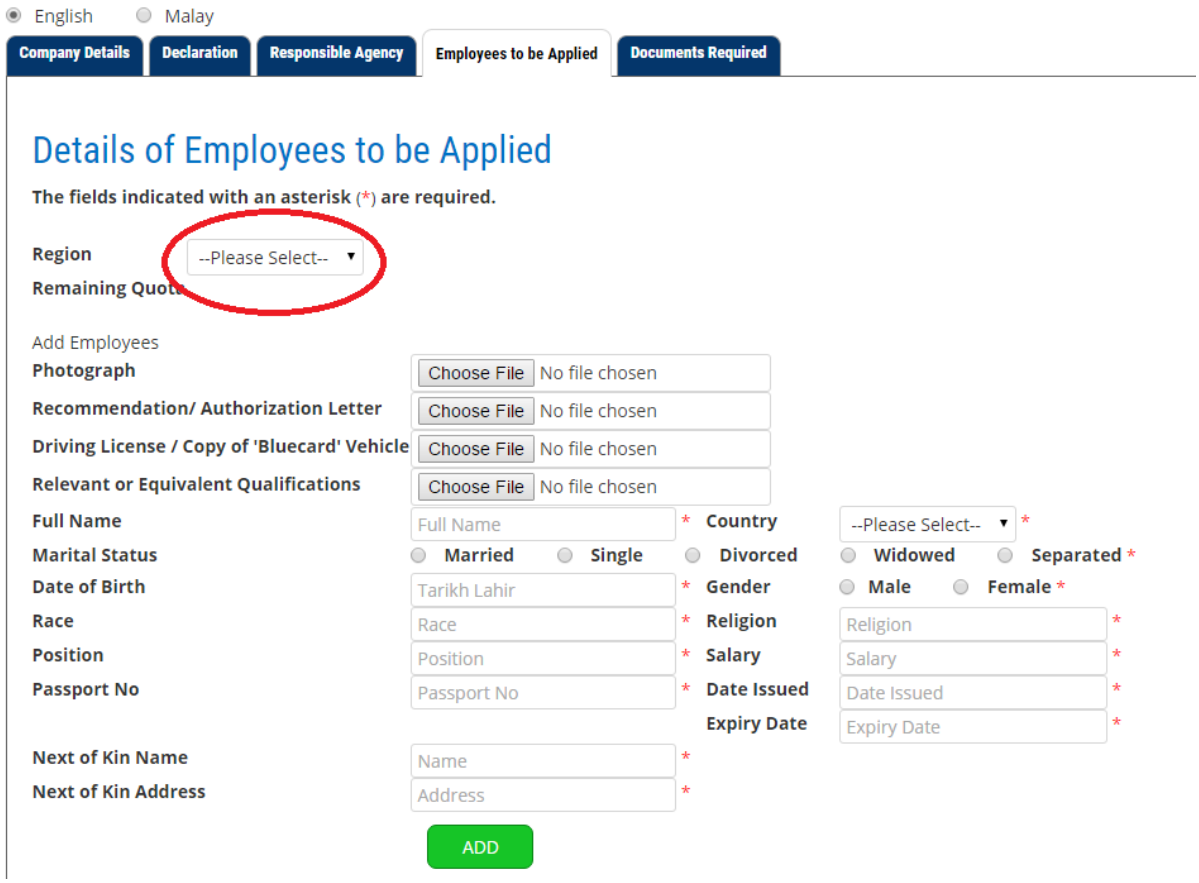


Click on "**Next**" when applicant has **VERIFIED** that the information retrieved is correct.

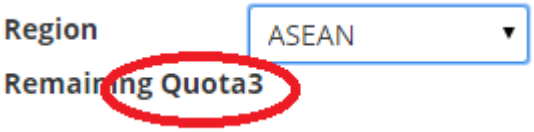
D. EMPLOYEES TO BE APPLIED TAB

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES.

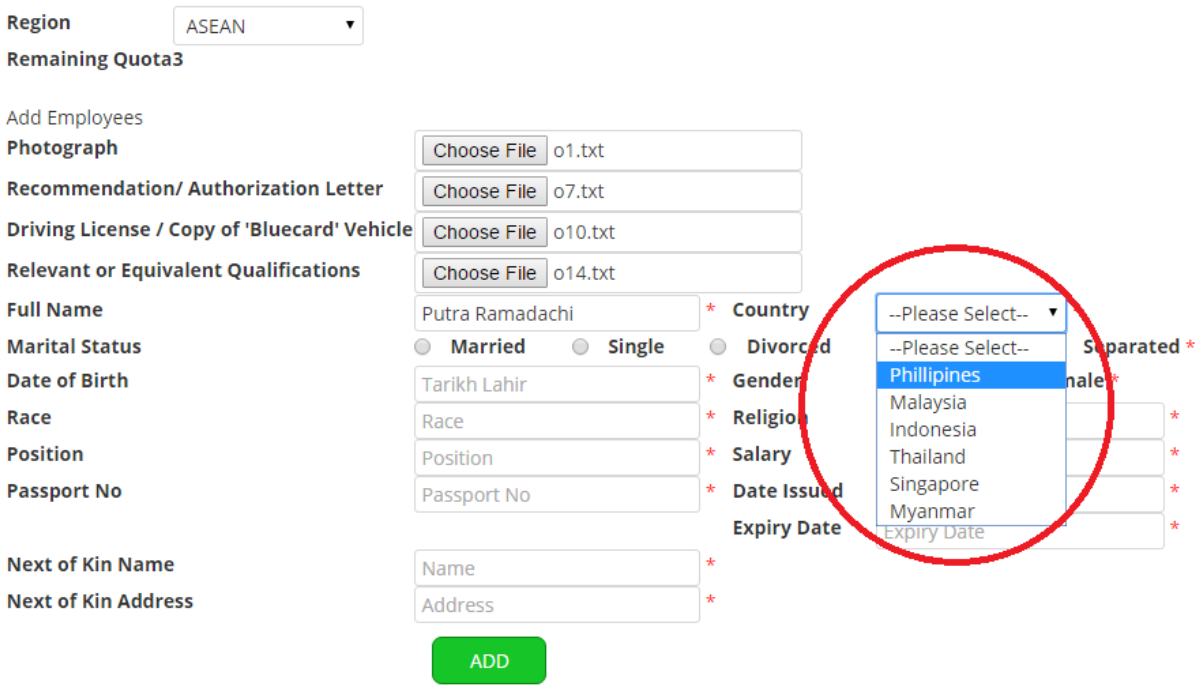
(I) Applicant **must select** from the "**Region**" to see what Country Regions **are available** from the Foreign Worker's License Quota to **apply** the **Work Pass Recommendation** From.



(ii) In this example, the Applicant has a **total remaining** "**3**" or **three quota left** from the ASEAN region which the **Work Pass Recommendation** can be applied from.



(iii) Applicant **MUST** provide **ALL** of the **requested information** and Applicant **MAY ONLY apply WorkPass** from the **list of Countries** provided from the list.



(iii) When Applicant has **provided ALL** of the requested information, Applicant may click "**Add**" to add the Employee to the list of Work Pass Recommendation application table:

REMINDERS FOR ATTACHMENTS:

- Do not use the "**SAME**" FILE NAME for different attachments
- PLEASE avoid using "**Special Characters**" or "**Symbols**" for Applicant's file names (!@#$%^&*), but Applicant may use underscores " _ ".
- PLEASE PROVIDE the **Mandatory ATTACHMENTS**, and **if AVAILABLE**, provide the **Optional ATTACHMENTS** for a higher chance of success at applying.
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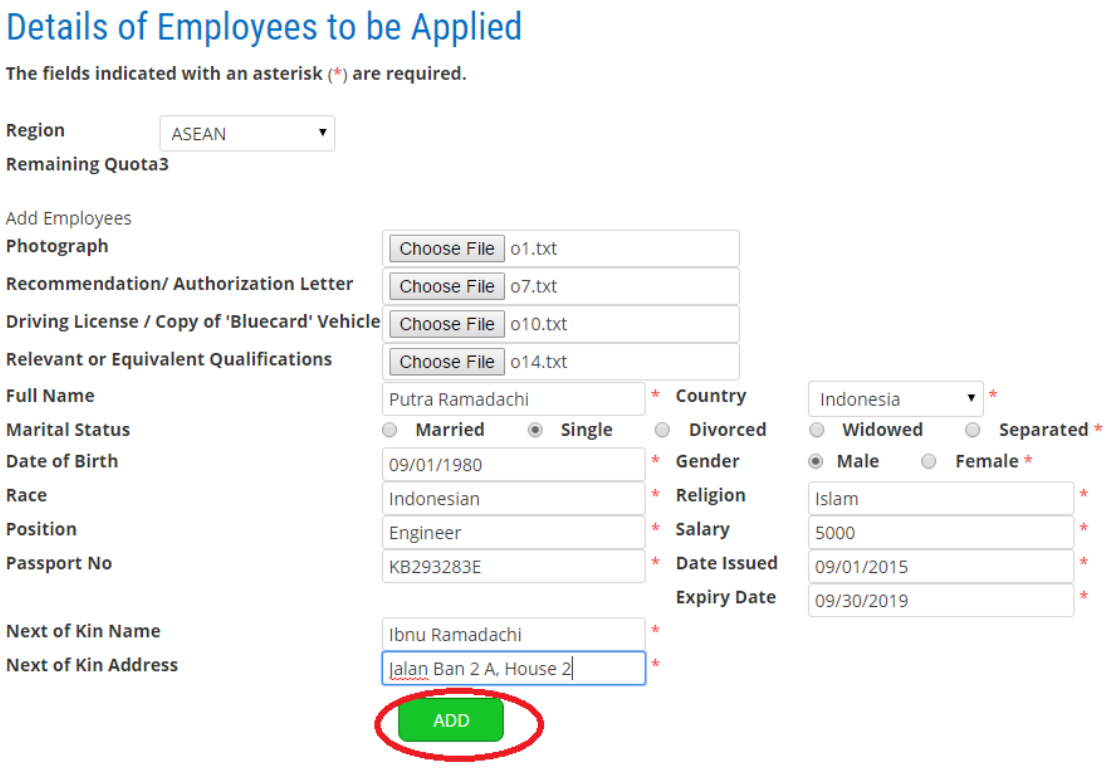
  "**BUR555_APPLICANT_SPOUSE**"



MANDATORY FIELDS	SAMPLE	NOTES
"Full Name"	*Putra Ramadachi*	*Please provide the full name of the employee.*
"Country"	*Indonesia*	*Please select from Options provided*
"Marital Status"	*Single*	*Please select from Options provided*
"**Date of Birth**"	*01/09/1990*	*Day-Month-Year (DD/MM/YYYY)*

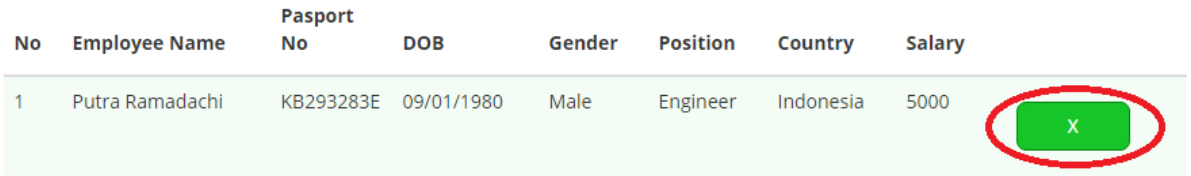
"**Gender"**	*Male*	*Please select the Gender.*
"**Race**"	*Indonesian*	*Please state the race of the employee.*
"**Religion**"	*Islam*	*Please state the Religion of employee.*
"**Position"**	*Please state the Position of the Employee*	*Position must be similar role to the Role **AS STATED** ON approved Quota.*
"**Salary**"	*5000*	*Numbers Only (without the $ dollar sign)*
"Passport No"	*KB293923398E*	*Alphanumeric*
"Date Issued"	*09/01/2015*	*Please provide the issue date of the Passport.*
"Expiry Date"	*09/30/2019*	*Please provide the expiry date of the Passport.*
"Next of Kin Name"	*Ibnu Ramadachi*	*Please provide the Employee's Next of Kin Name*
"Next of Kin Address"	*Jalan Ban 2 A, House 2*	*Please provide the Employee's Next of Kin Address*

OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-

(iv) Applicant may "**Add**" more Employees to the list by repeating the process above, but the **MAXIMUM allowed** is **determined** by the **Number of REMAINING QUOTA** left in the license shown in **step number (ii)**

No	Employee Name	Pasport No	DOB	Gender	Position	Country	Salary	
1	Putra Ramadachi	KB293283E	09/01/1980	Male	Engineer	Indonesia	5000	X
2	Riza Ansori	AB293923A	09/01/1985	Male	Programmer	Indonesia	2000	X

(v) Applicant can also remove any mistakes or errors by clicking on "**X**".

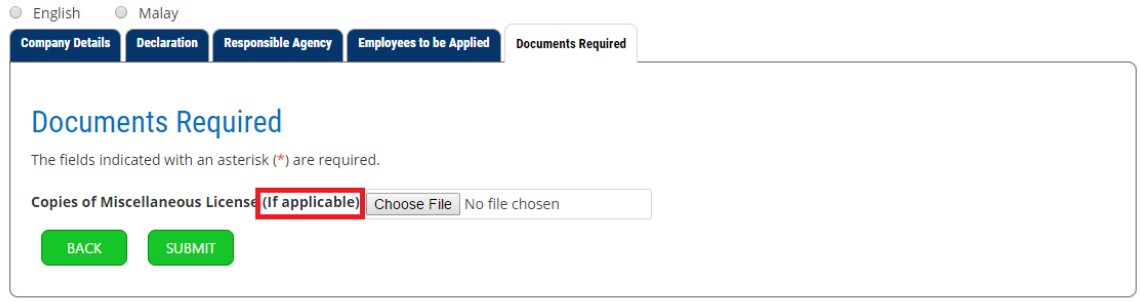


No	Employee Name	Pasport No	DOB	Gender	Position	Country	Salary	
1	Putra Ramadachi	KB293283E	09/01/1980	Male	Engineer	Indonesia	5000	X

(vi) When Applicant is satisfied with all of the information entered, they may click on "**Next**" to proceed to the final tab.

E. DOCUMENTS TAB

THIS TAB IS **OPTIONAL** FOR APPLICANTS OF ALL TYPES.

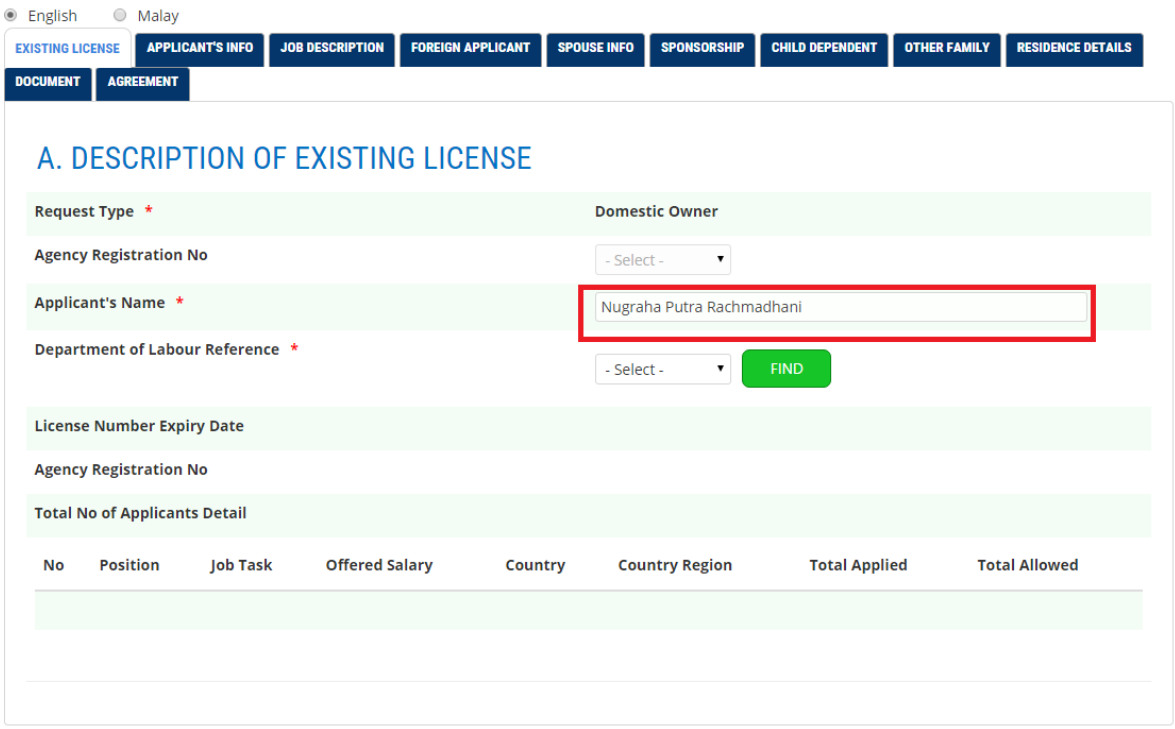


Applicant **MAY PROVIDE** the attachment as requested if **AVAILABLE**, if not, the applicant may choose to skip this attachment and click on "**Submit**" to confirm the submission.

3.7 DOMESTIC HELPER'S LICENSE (AMAH) RENEWAL FORM

A. DESCRIPTION OF EXISTING LICENSE TAB

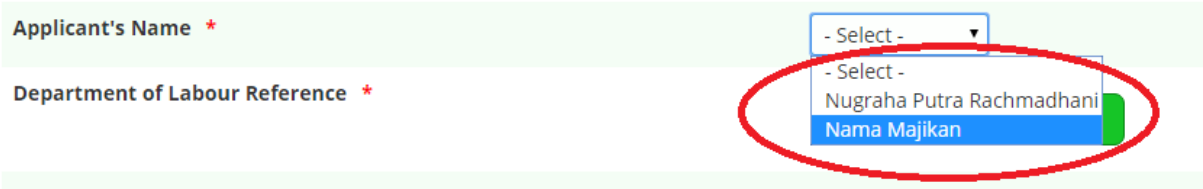
(i) Similarly to New Applications, **Individuals can only apply Renewal** for their **own Licenses**.



ALTERNATIVELY; if an employment agency is applying on behalf,

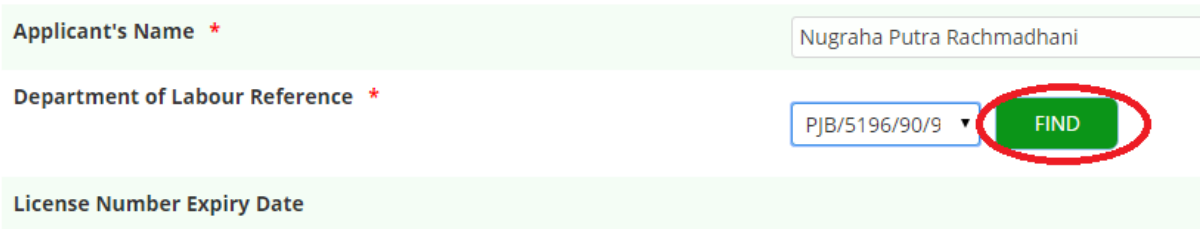
Employment Agencies MUST select their Agency Registration No:

The Agency can then look up the list of "**Applicant Names**" whom have **SELECTED** or **NOMINATED** them to apply on their **behalf**.

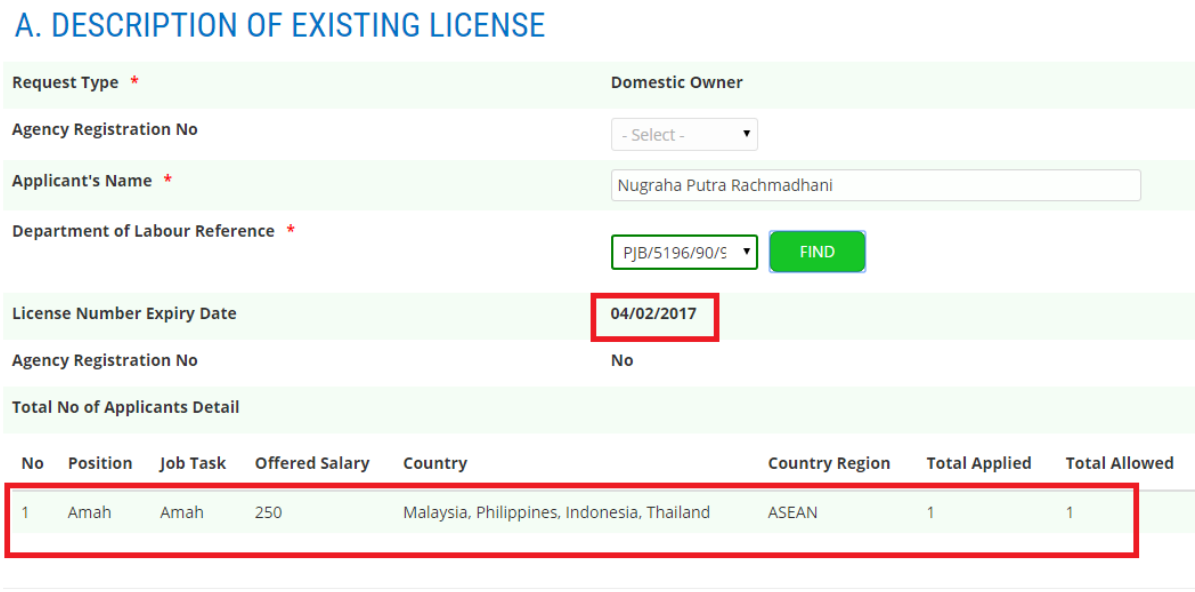


(ii) Applicant must then select their "**PJB**" License to **be Applied** for **Renewal.**

(iii) Applicant then should click on "**Find**".



(iv) After clicking on "**Find**", the **License Expiry Date** and **Amah License Details** will appear as shown below:



(v) Applicant **MAY NOT EDIT** these fields but is **only** able to **Review**, when ready click on "**Next**".

B. APPLICANT'S INFORMATION TAB

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **APPLICANT'S INFORMATION** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

B. APPLICANT'S INFORMATION

Application Reference Number :	DHLNEW_5417
Applicant's Name	nugraha putra r
Identity Card Number	00054008
IC Colour	Yellow
Gender	Male
Date of Birth	04/05/1959
Citizenship	BRUNEI
Religion	ISLAM
Status	Married
Mailing Address	NO.73,SPG.118
House Address	NO.73,SPG.118
District	Brunei Muara
Telephone Number	8689699

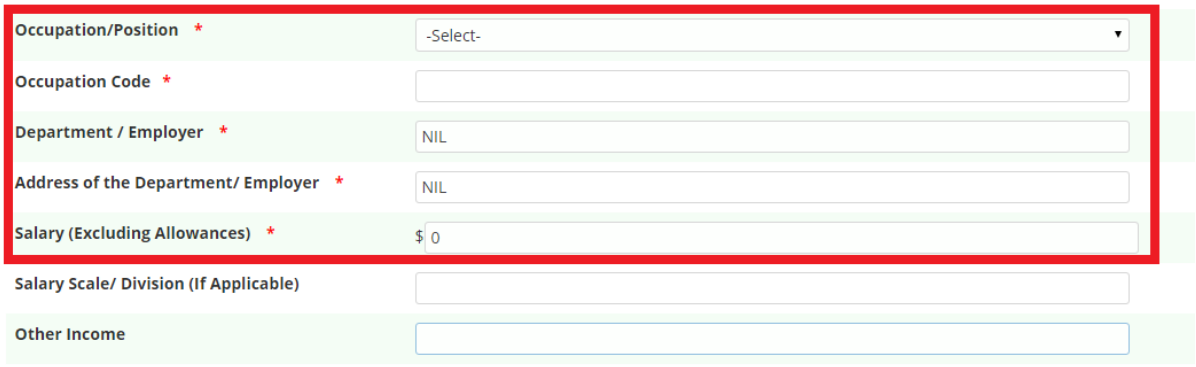
BACK NEXT

C. APPLICANT'S JOB DESCRIPTION

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPE AND APPLICANT **MAY UPDATE** THE RETRIEVED INFORMATION.

In some cases of renewal applications, some of the information may not be retrieved due to the unavailability of such information, in such cases, the applicant **MUST PROVIDE ALL** OF the requested **MANDATORY** information as stated in the form:

C. APPLICANT'S JOB DESCRIPTION



MANDATORY FIELDS	SAMPLE	NOTES
"**Occupation/Position**"	*Legislators and senior officials*	*Please select from the options available, if NOT available, please select the occupation MOST similar.*
"**Occupation Code**"	*AUTOMATICALLY SELECTED*	*Applicant cannot select this field.*
"Department / Employer"	*Department of Labour Law Firm*	*Applicant may write "**Not Applicable**" where appropriate.*
"Employer Address"	*Jalan 2 Kiulap*	*Applicant may write "**Not Applicable**" where appropriate otherwise, leave blank.*
"Salary (Excluding Allowance)"	*"4500"*	*Please state Salary, if there is **no income**, please put "**0**"*

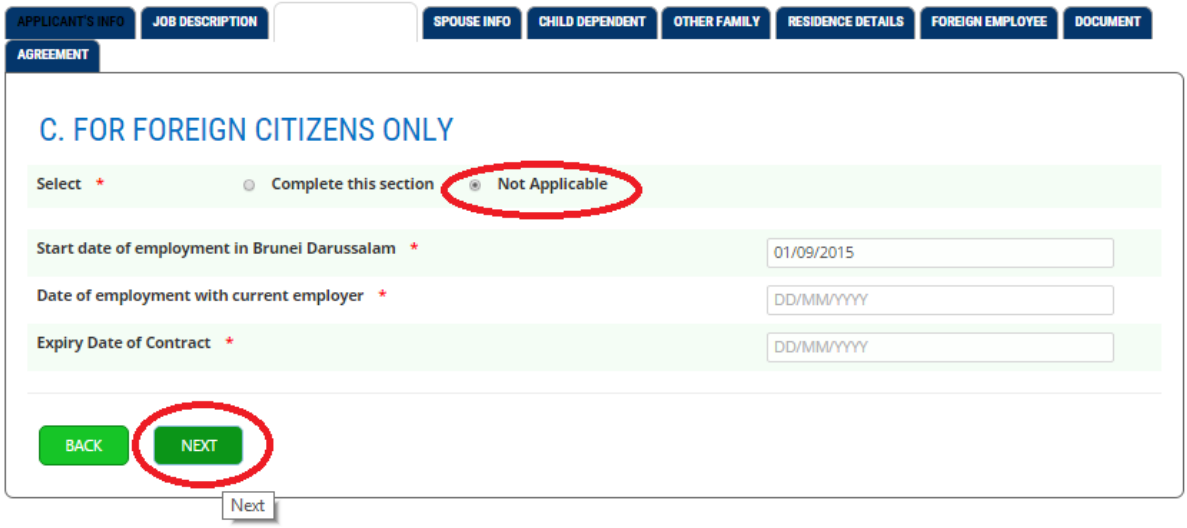
OPTIONAL FIELDS	SAMPLE	NOTES
"**Salary Scale**"	*"None"*	*Provide information if available.*
"**Other Income**"	*"0"*	*Put "0"if no income, otherwise, please state amount in number.*

D. FOREIGN CITIZENS INFORMATION

THIS TAB IS **ONLY APPLICABLE** TO APPLICANTS WHOM ARE **FOREIGN CITIZENS ONLY** AND APPLICANT **MAY UPDATE** THE RETRIEVED INFORMATION.

IF Applicant is a *Brunei Citizen* or *Permanent Resident*, Please select "**Not Applicable**" and click "**NEXT**".

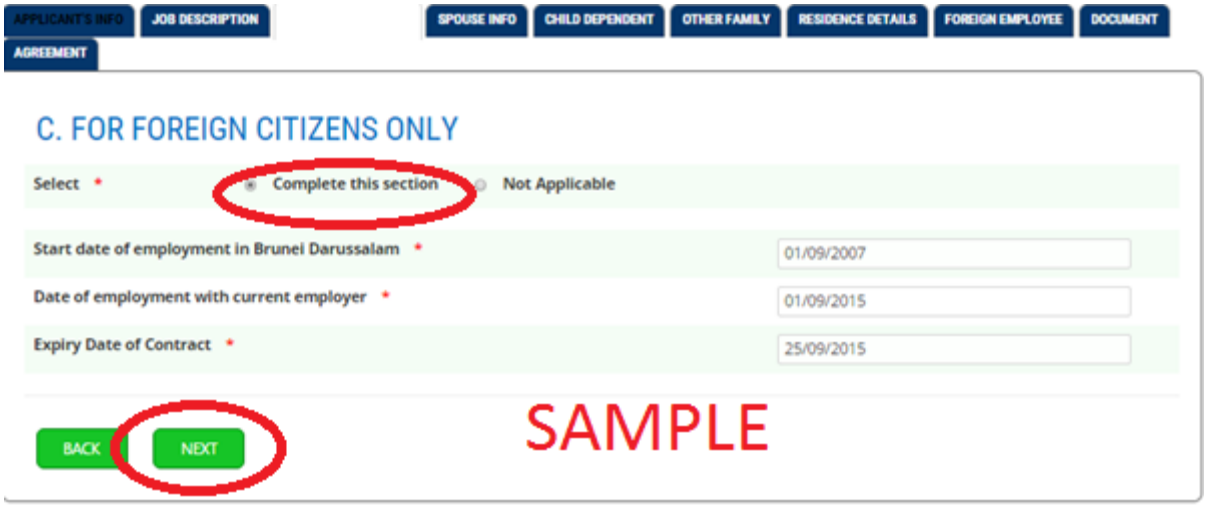
OTHERWISE, please select "**Complete this section**" and provide the necessary information being requested.



MANDATORY FIELDS	SAMPLE	NOTES
"**Start date of employment in Brunei Darussalam**"	*01/09/2007*	*Please provide the date whereby the applicant FIRST came to work in Brunei.* *Format:* ***Day-Month-Year (DD/MM/YYYY)***
"**Date of employment with current employer**"	*25/05/2010*	*Please provide the start date of employment of the applicant with the existing employer.*

"**Expiry Date of Contract**"	*25/05/2017*	*Please provide a valid expiry date of the applicant's existing work contract with his/her current employer.*

OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-



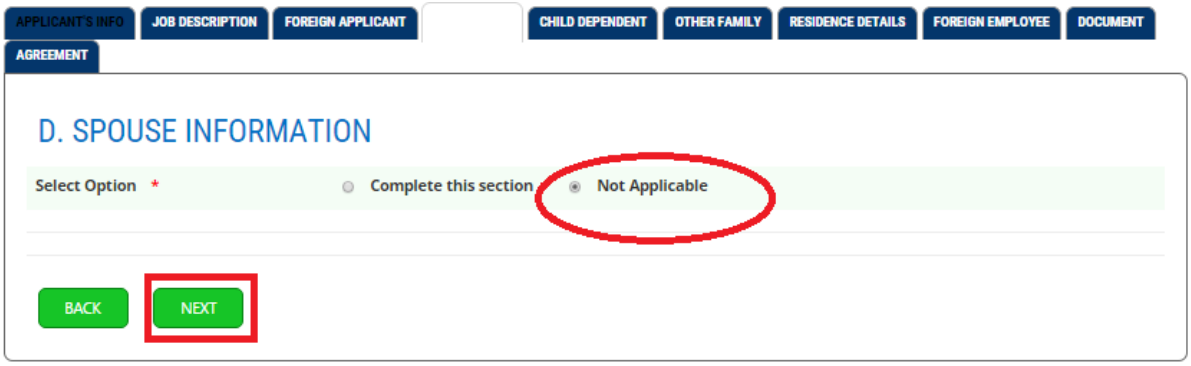
Click on "**Next**" when ready.

E. SPOUSE INFORMATION

THIS TAB IS **ONLY APPLICABLE** TO APPLICANTS WHOM ARE **MARRIED/DIVORCE/WIDOWED** ONLY AND APPLICANT **MAY UPDATE** THE RETRIEVED INFORMATION.

IF Applicant is NEITHER *married*, *divorced* nor *widowed*, Please select "**Not Applicable**" and click "**NEXT**".

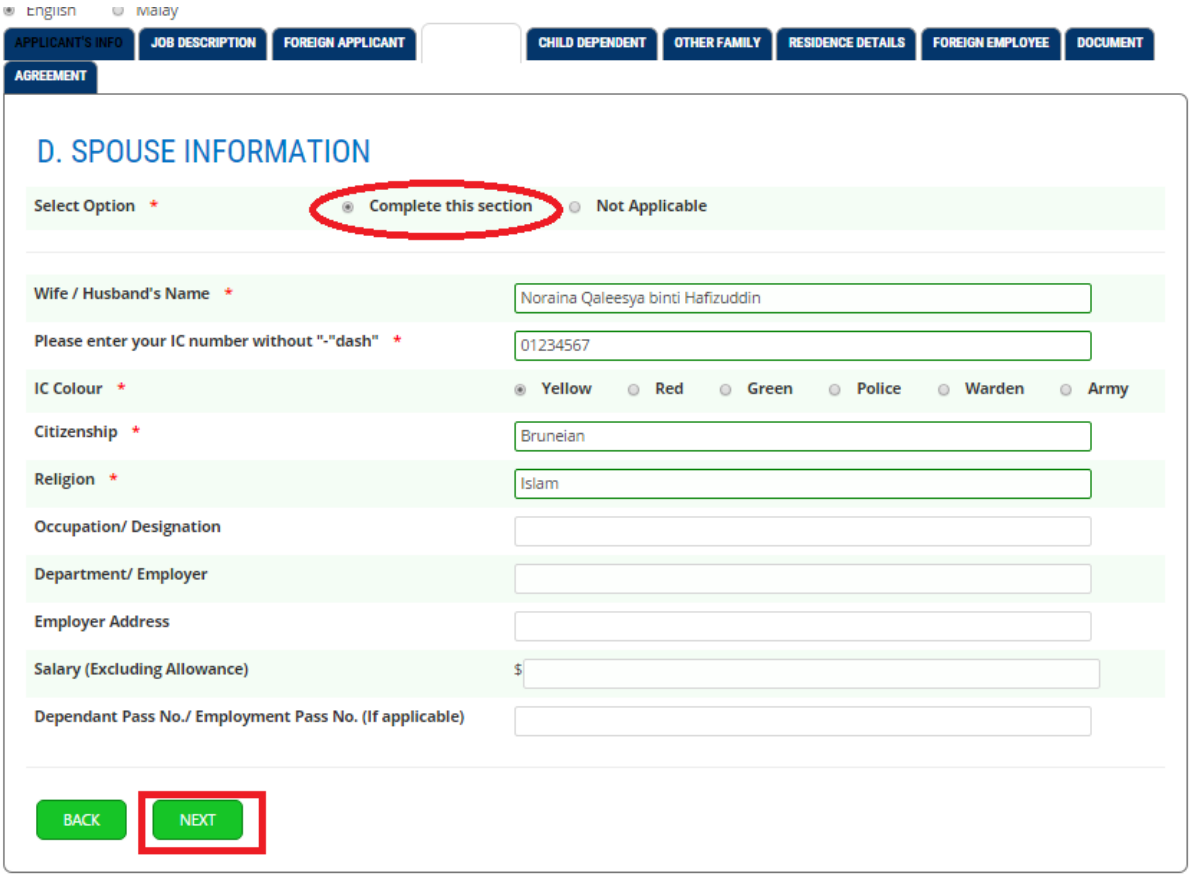
OTHERWISE, please select "**Complete this section**" and provide the necessary information being requested.



MANDATORY FIELDS	SAMPLE	NOTES
"**Wife / Husband's Name**"	*Noraina Aaleesya binti Hafizuddin*	*Please provide full name*
"**IC Number**"	*01073358*	*Please enter the ic number without "dash"*
"**IC Colour**"	*Yellow*	*Select from one of the options available.*
"**Citizenship**"	*Bruneian*	-
"**Religion**"	*Islam*	-

OPTIONAL FIELDS	SAMPLE	NOTES
"Occupation / Designation "	*Housewife*	*Please describe occupation, even if person is not working, please enter "**Unemployed**".*
"Department / Employer "	*Not Applicable*	*Applicant may write "**Not Applicable**" where appropriate.*
"Employer Address"	*Not Applicable*	*Applicant may write "**Not Applicalbe**" where appropriate otherwise, leave blank.*

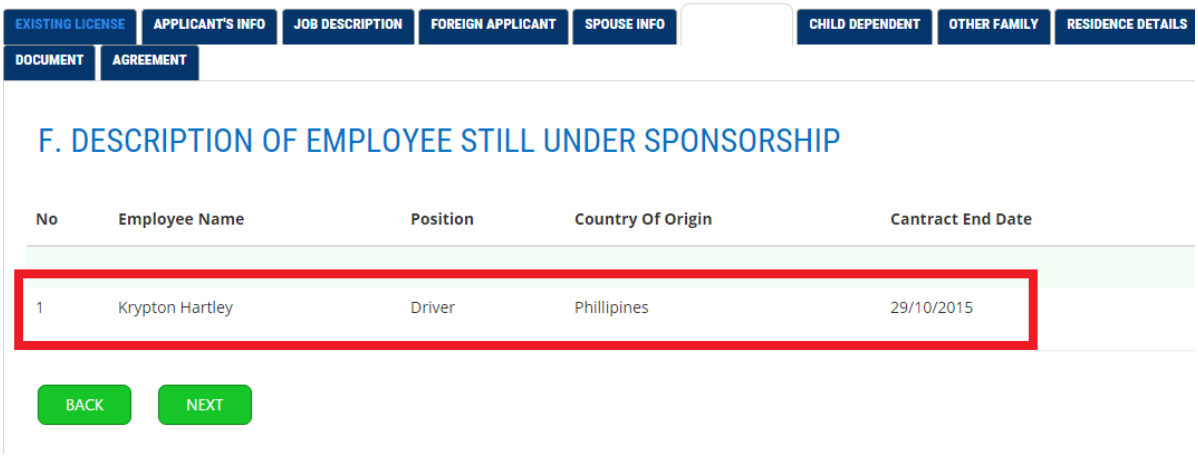
"Salary (Excluding Allowance)"	*"0"*	*Please state Salary, if there is **no income**, please put "**0**"*
"Dependant Pass No. / Employment Pass No. "	*E02332*	*Provide IF Available, otherwise , **leave blank**.*



Click on "**Next**" when ready.

F. SPONSORSHIP

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **EMPLOYEE OR AMAH STILL SPONSORED UNDER THIS DOMESTIC HELPER'S LICENSE**, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

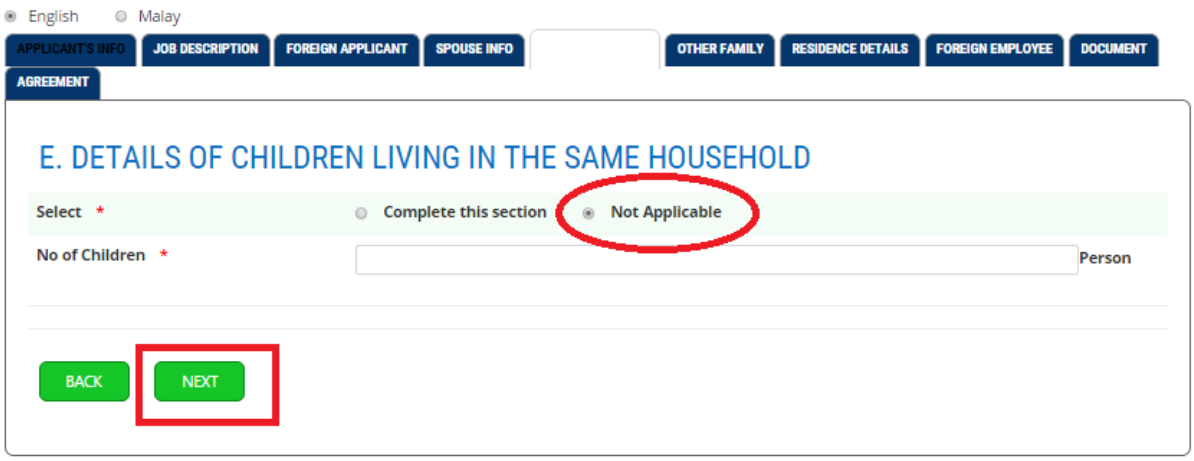


G. CHILD DEPENDENT

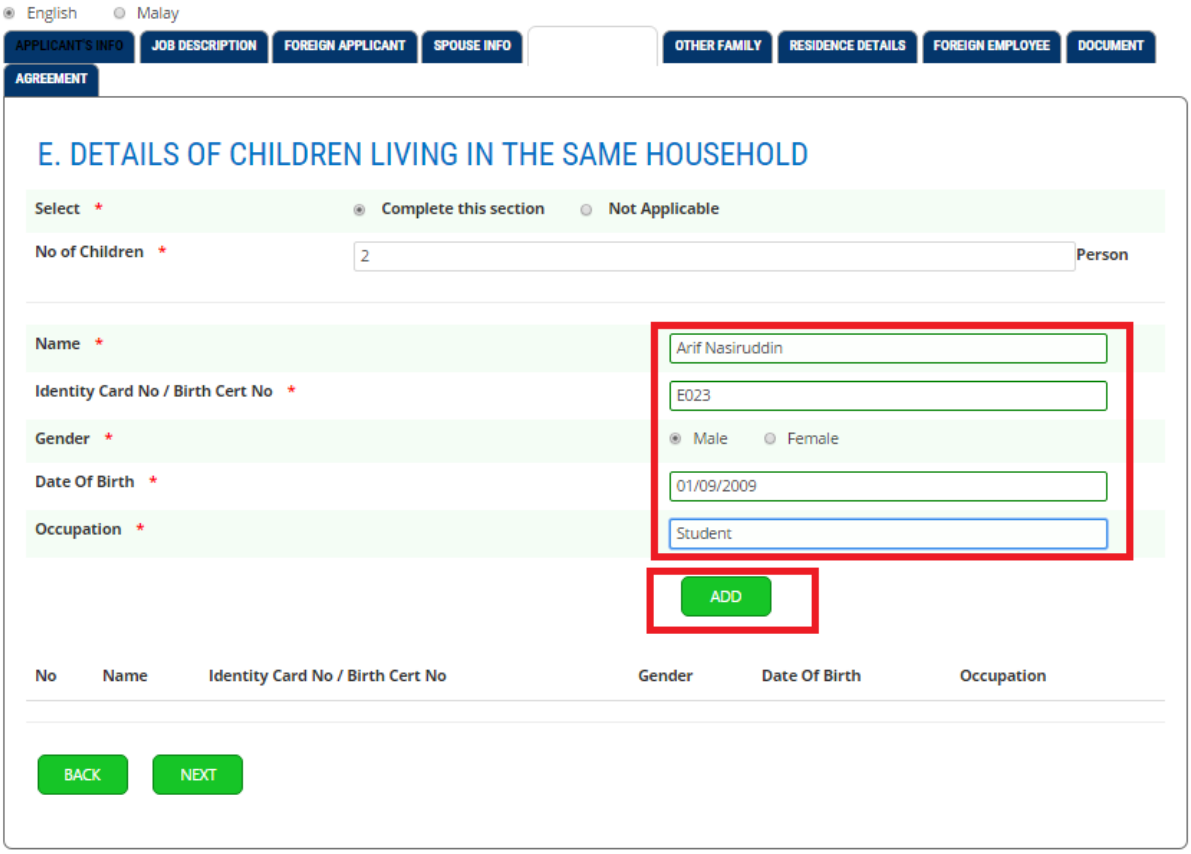
THIS TAB IS **ONLY APPLICABLE** TO APPLICANTS WHOM HAVE **DEPENDENTS (CHILDREN)** AND APPLICANT **MAY UPDATE** THE RETRIEVED INFORMATION.

IF Applicant DOES NOT HAVE ANY *children* or *dependents living together*, please select "**Not Applicable**" and click "**NEXT**".

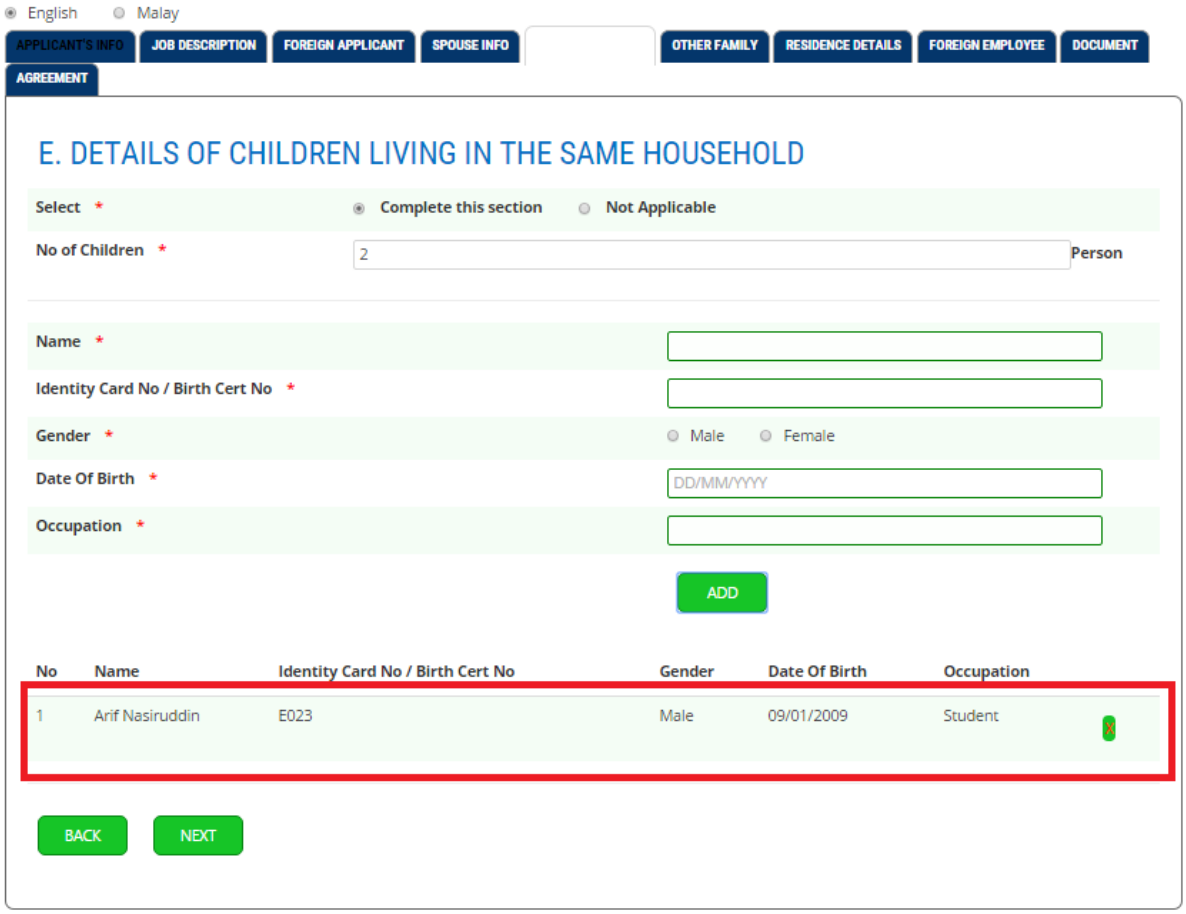
OTHERWISE, please select "**Complete this section**" and provide the necessary information being requested.



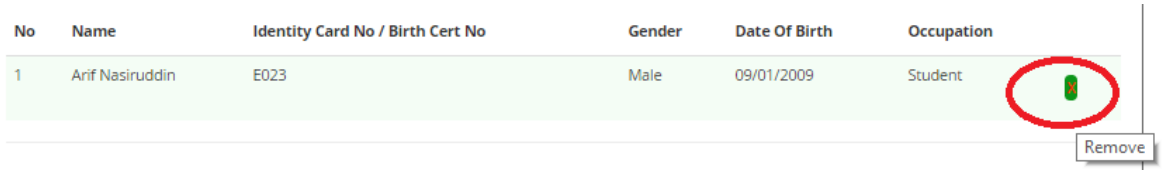
To provide the details of each dependent, please complete the mandatory fields for each dependent and click "**ADD**" when ready.



After clicking "**ADD**", the information will show up in the table as shown below, Applicant may choose to continue Adding more "**Dependents**" to the table or proceed to the NEXT "tab".



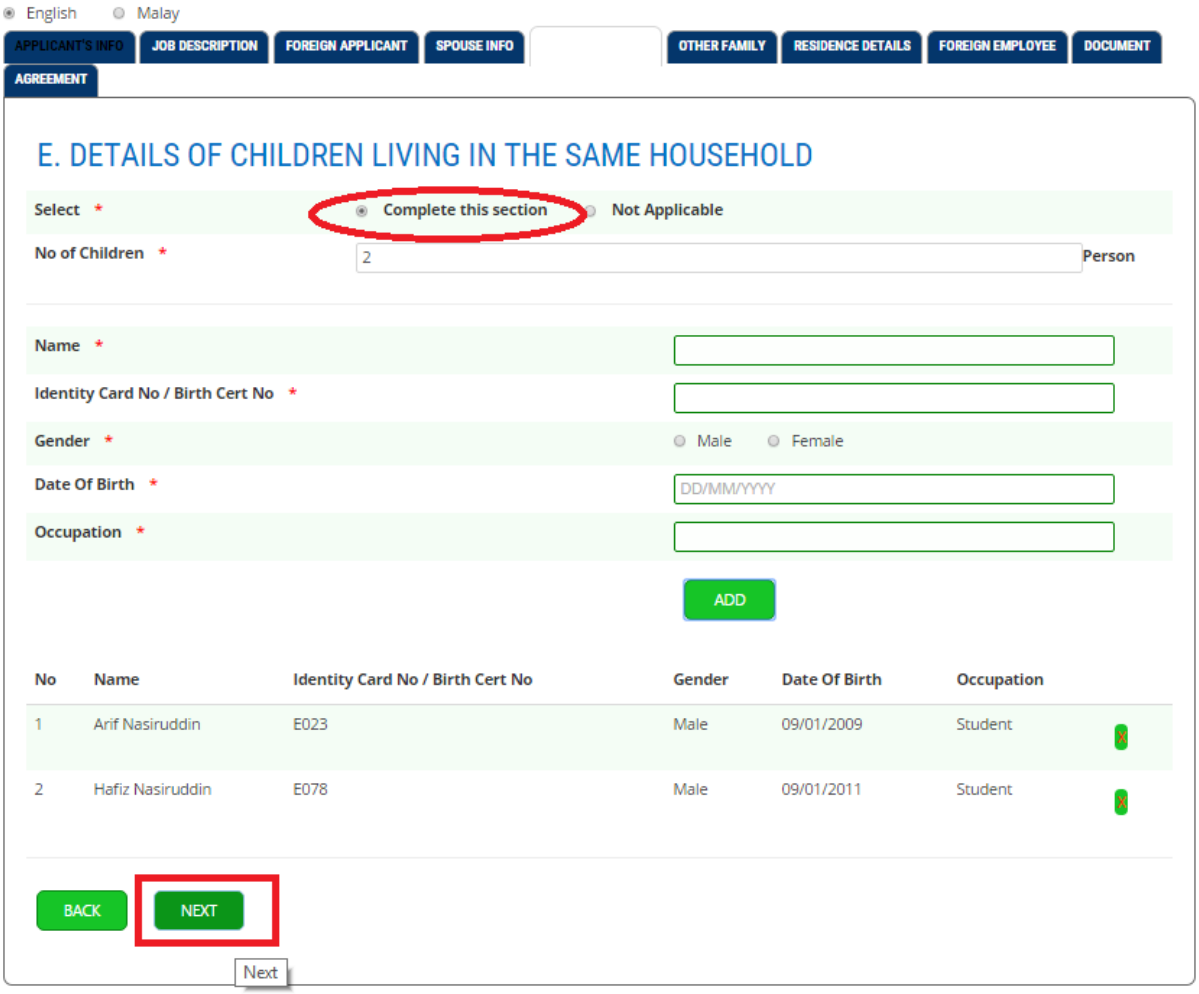
IF the Applicant has made a **mistake**, Applicant may remove it by clicking on the "**X**" button on the right.



MANDATORY FIELDS	SAMPLE	NOTES
"**No of Children"**	*"2"*	*Please enter the total number of Children.*
"**Name**"	*Arif Nasiruddin*	*Please enter the full name of the Child.*

"**IC /Birth Cert Number**"	*"0107335" , "E0232X" , etc* ***(Varies on type of ID provided)***	*Please provide the number of any identity cards or birth certificate number of this child.*
"**Gender**"	*Male*	*Select from the Provided Options*
"**Date of Birth**"	*09/01/2009*	*Day-Month-Year (DD/MM/YYYY)*
"**Occupation**"	*Student*	*If children is not working, writing "Dependent" or "Not Applicable" is fine.*

OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-



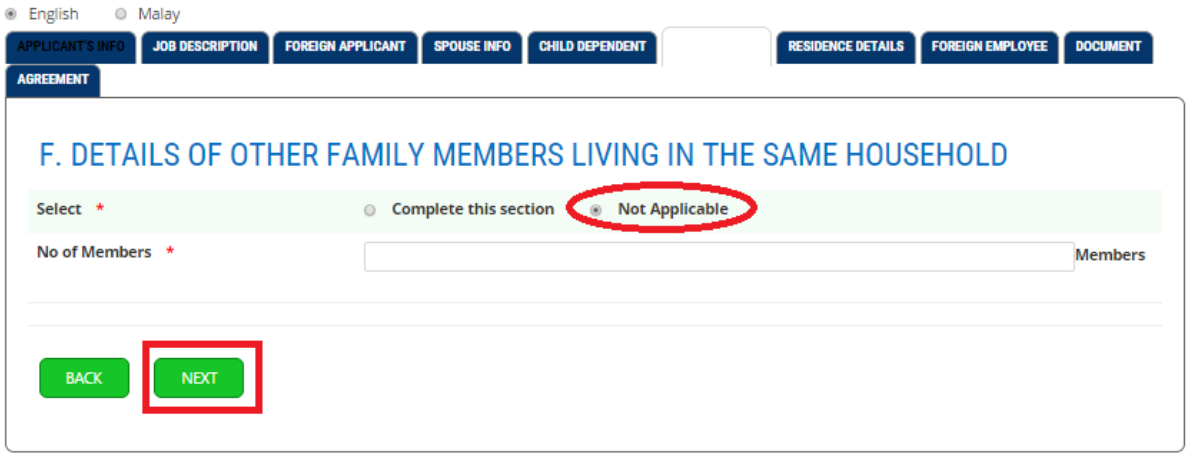
Click on "**Next**" when ready.

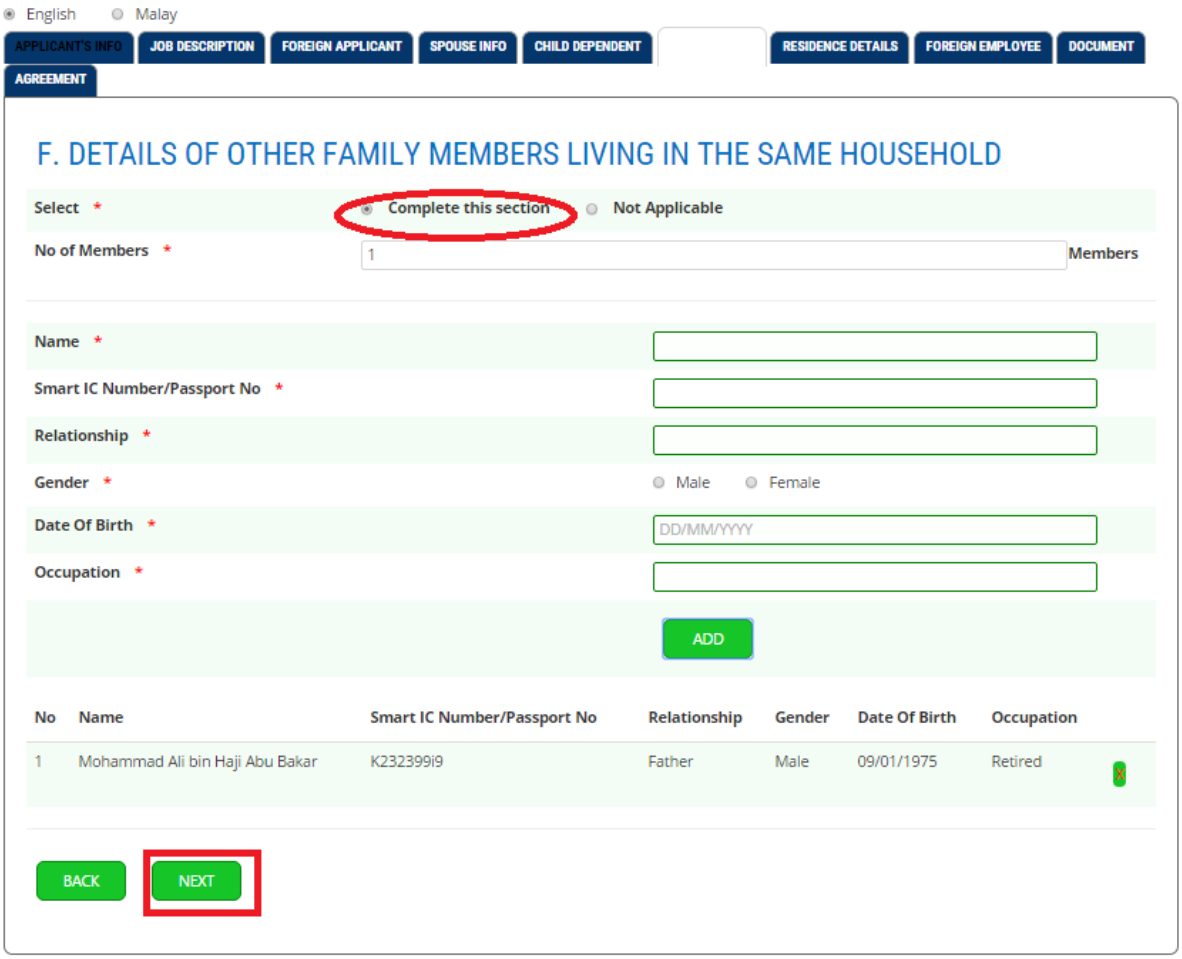
H. OTHER FAMILY MEMBERS

THIS TAB IS **ONLY APPLICABLE** TO APPLICANTS WHOM HAVE **FAMILY MEMBERS LIVING TOGETHER** AND APPLICANT **MAY UPDATE** THE RETRIEVED INFORMATION.

IF Applicant DOES NOT live with his/her *family members*, please select "**Not Applicable**" and click "**NEXT**".

OTHERWISE, please select "**Complete this section**" and provide the necessary information being requested.



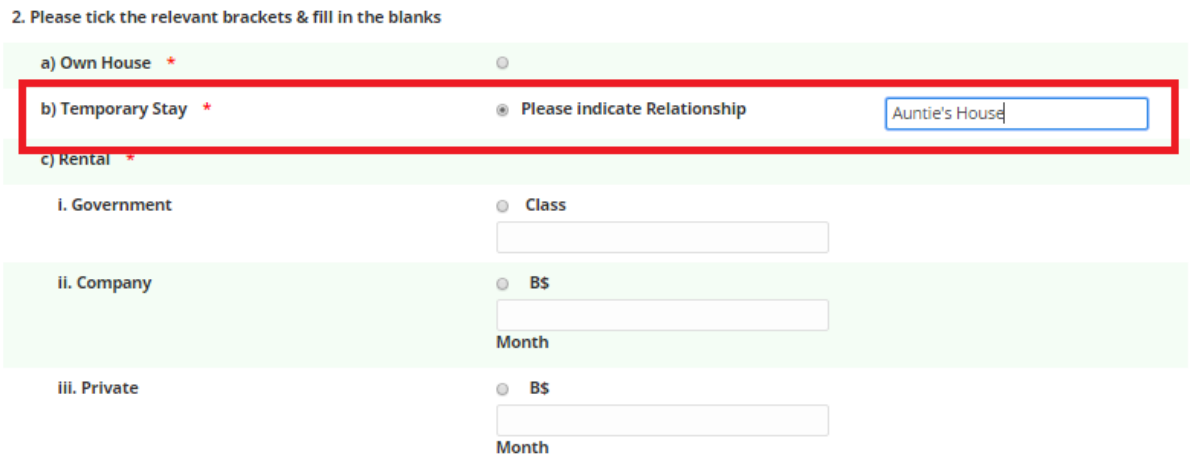


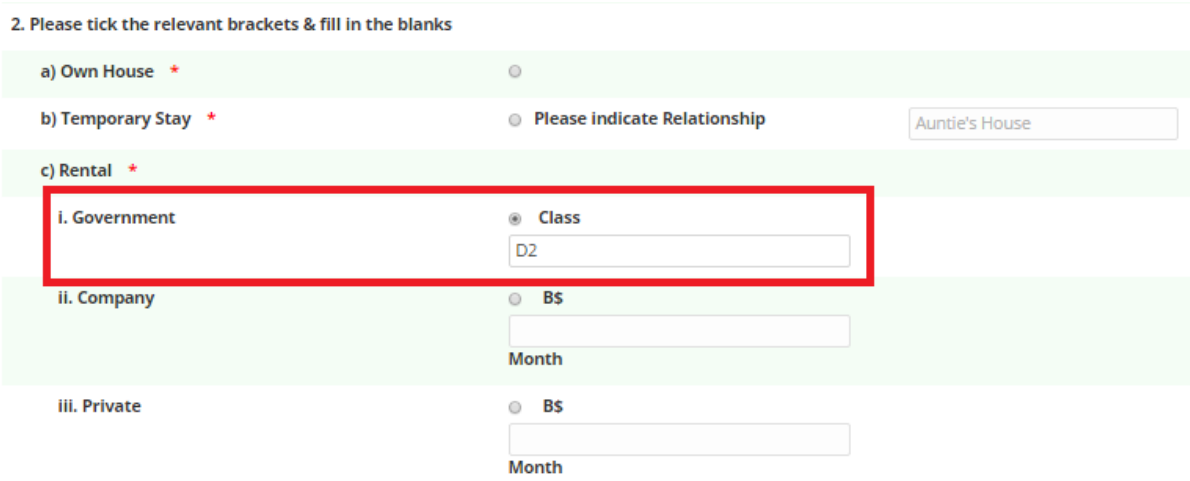
Applicant may follow the **SAME INSTRUCTIONS** provided in completing this tab simiarly to "**CHILD DEPENDENT**" tab.

I. RESIDENCE DETAILS

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES

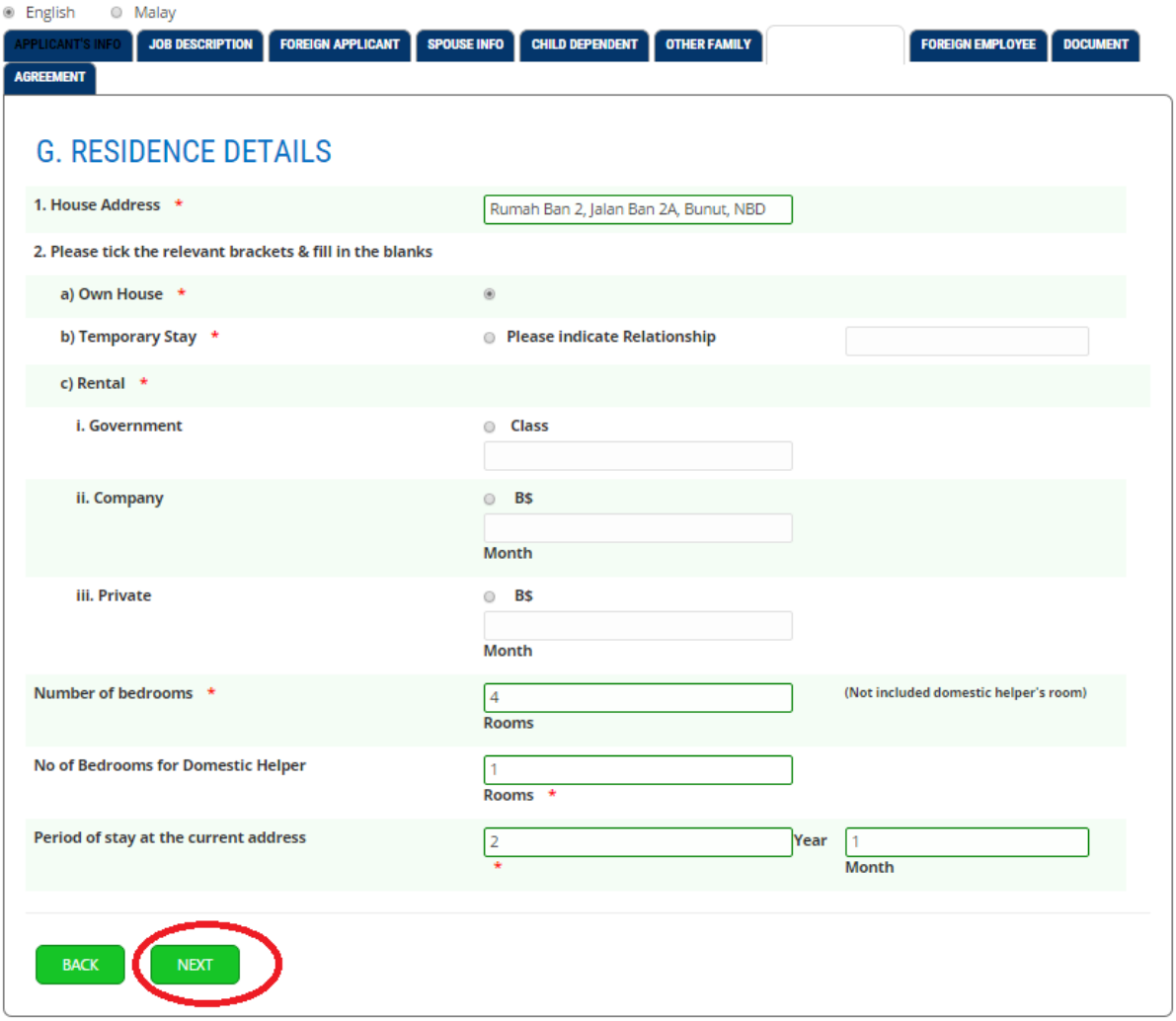
Complete the fields as requested and Applicant may also use the "**Mandatory**" and "**Optional" fields table** as the applicant's guide to filling in the form:





MANDATORY FIELDS	SAMPLE	NOTES
"**House Address**"	*No. 2, Jalan Ban 2*	*Please provide the full address.*
"**Ownership Type**"	*Example 1: Own House* ***OR*** *Example 2: Temporary Stay:* *Auntie's House* ***OR*** *Rental – Government: Class* **OR** *Example 3: Company: B$200 per month* ***OR*** *Example 4: Private: B$300 per month*	*Select one of the "Three(3)" Options available and provide the required information relevant.*
"**Number of bedrooms**"	*"4"*	*Please provide the total number of bedrooms AVAILABLE in the house EXCLUDING the ROOM to be occupied by the Amah(Domestic Helper).*
"**No. of Bedrooms for Domestic helper**"	*"1"*	*Please provide the total number of bedrooms AVAILABLE in the house FOR the Amah (Domestic Helper).*
"**Period of stay at the current Address**"	*"2" Year "1" Month*	*Please provide the estimated period of stay at the current residence in number of "Years" and "Months"*

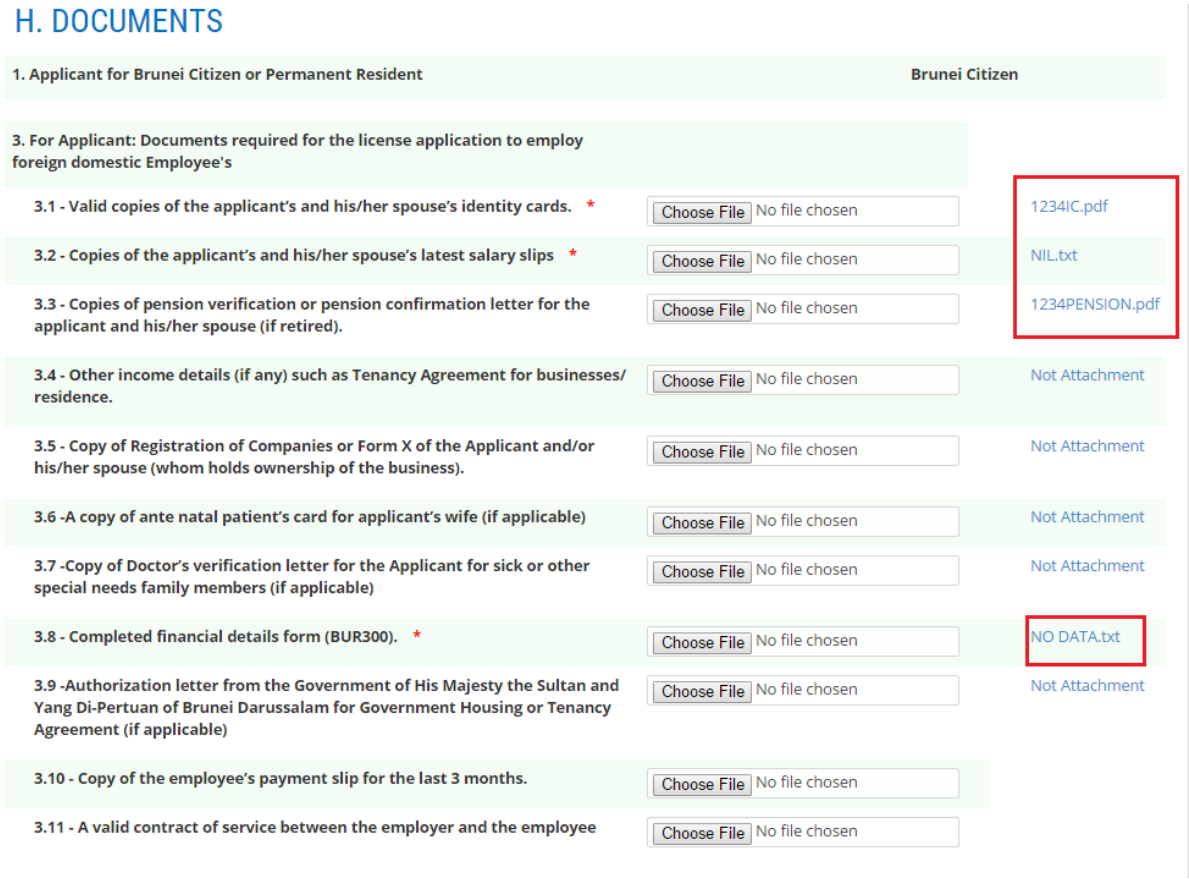
OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-



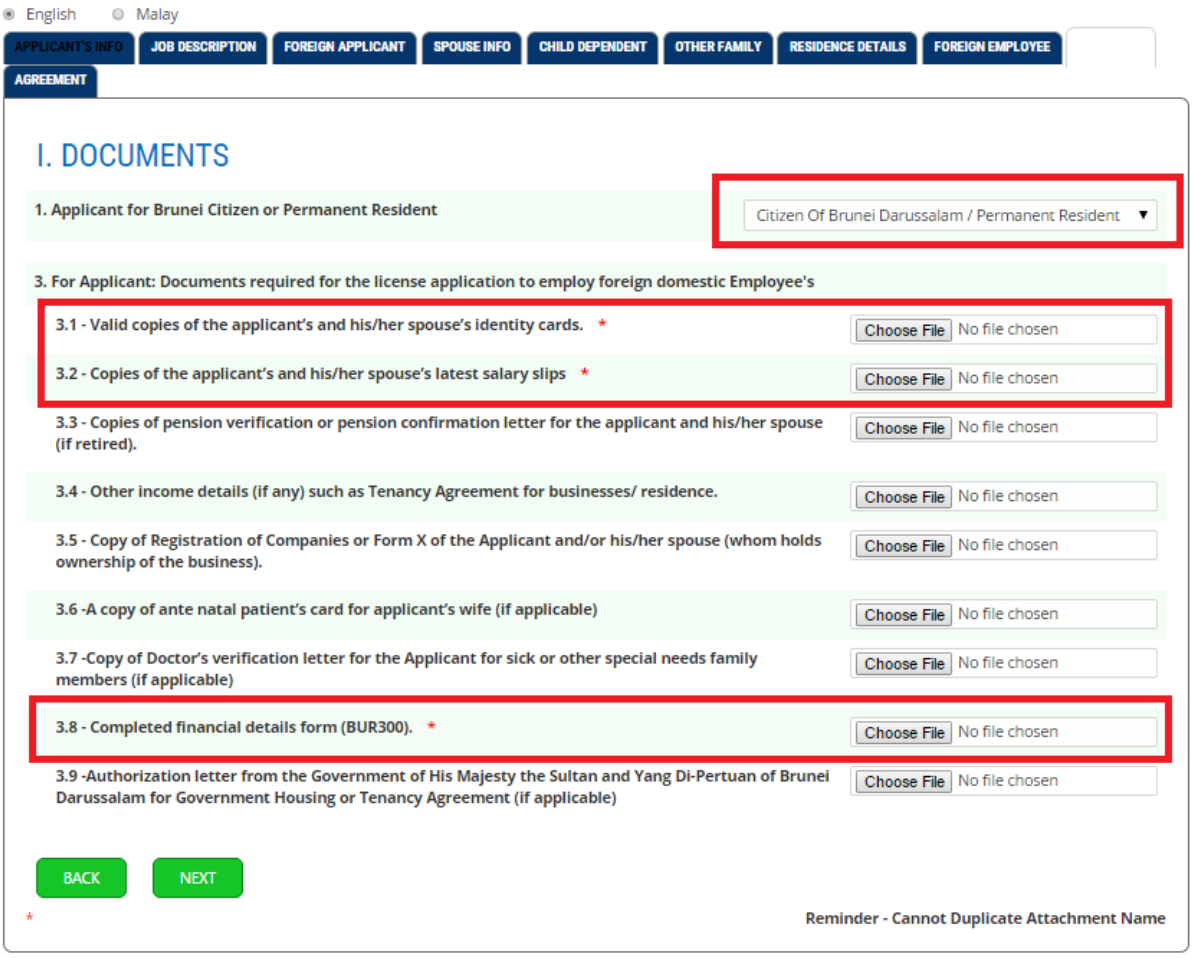
Click on "**Next**" when ready.

J. DOCUMENT

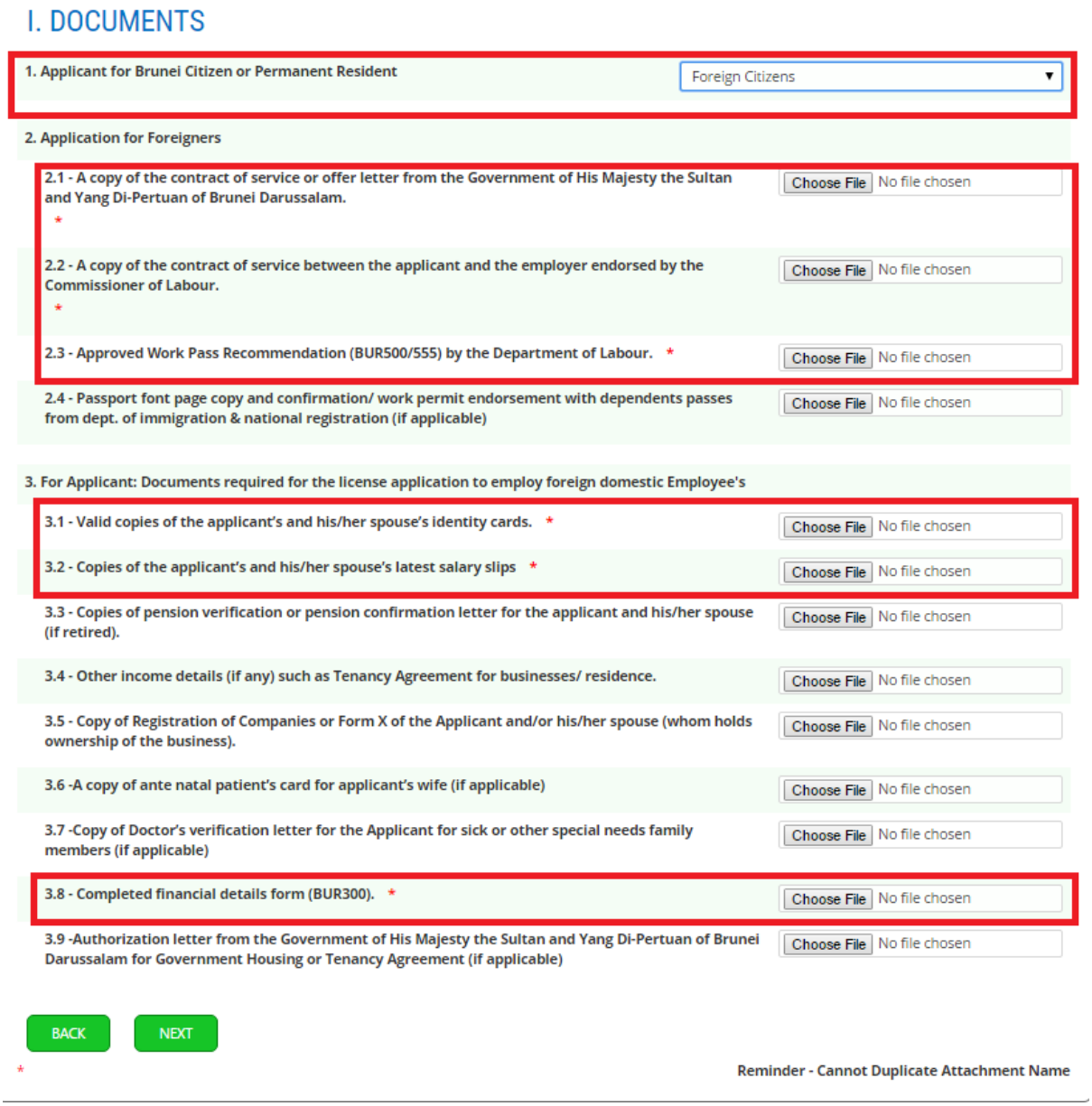
THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES AND APPLICANT **MAY UPDATE** ANY EXISTING DOCUMENTATIONS PREVIOUSLY SUBMITTED WITH AN UPDATED COPY BY RE-ATTACHING OR **RE-SUBMIT** THE **PREVIOUSLY SUBMITTED** COPY.



The Mandatory Attachments for "**Brunei Citizens**" or "**Permanent Resident**" are as shown as the screenshot:



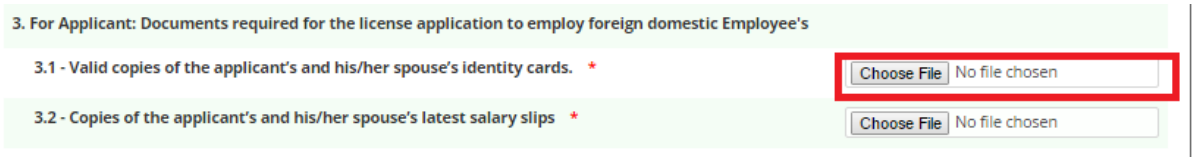
The Mandatory Attachments for "**Foreign Citizens"** are as shown as the screenshot:



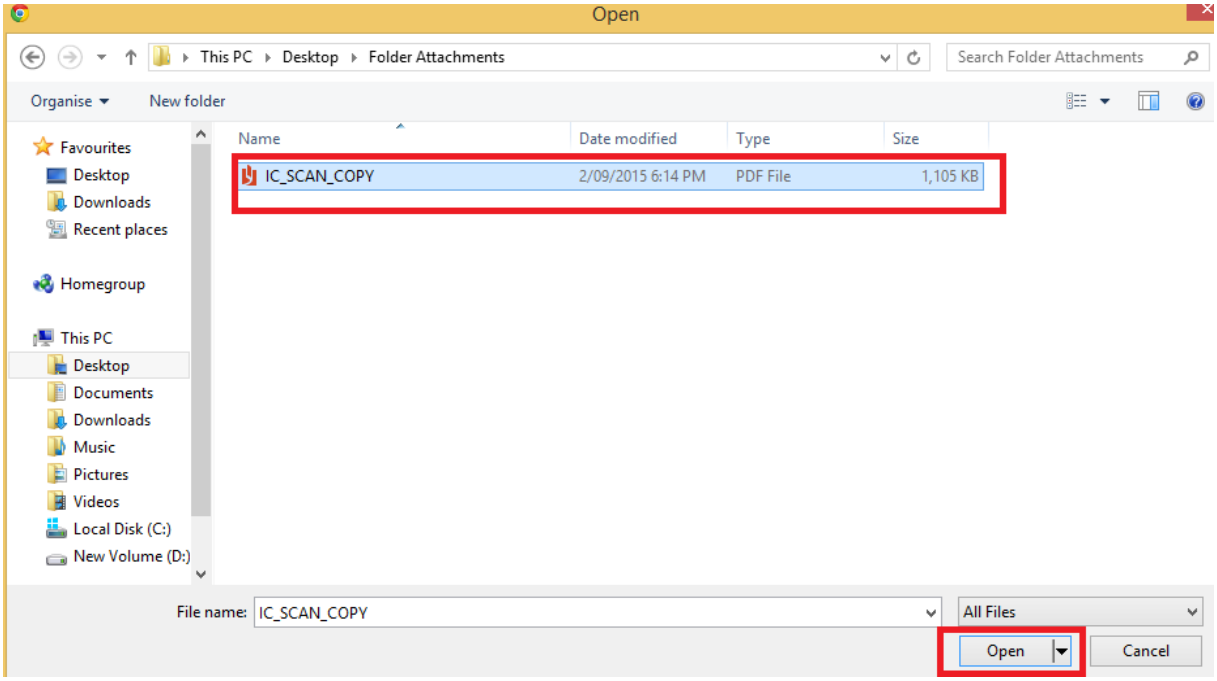
HOW TO ATTACH FILES:

Example: To Attach a "Valid Copies of the applicant's and his/her spouse's identity cards"

Click "**Choose File**":



Locate the scanned copy of Applicant's **"Valid Copies of applicant's and his/her spouse's identity cards", SELECT** it once and click "**OPEN**".



Applicant may verify if they have attached the correct file by looking at the name of the file:

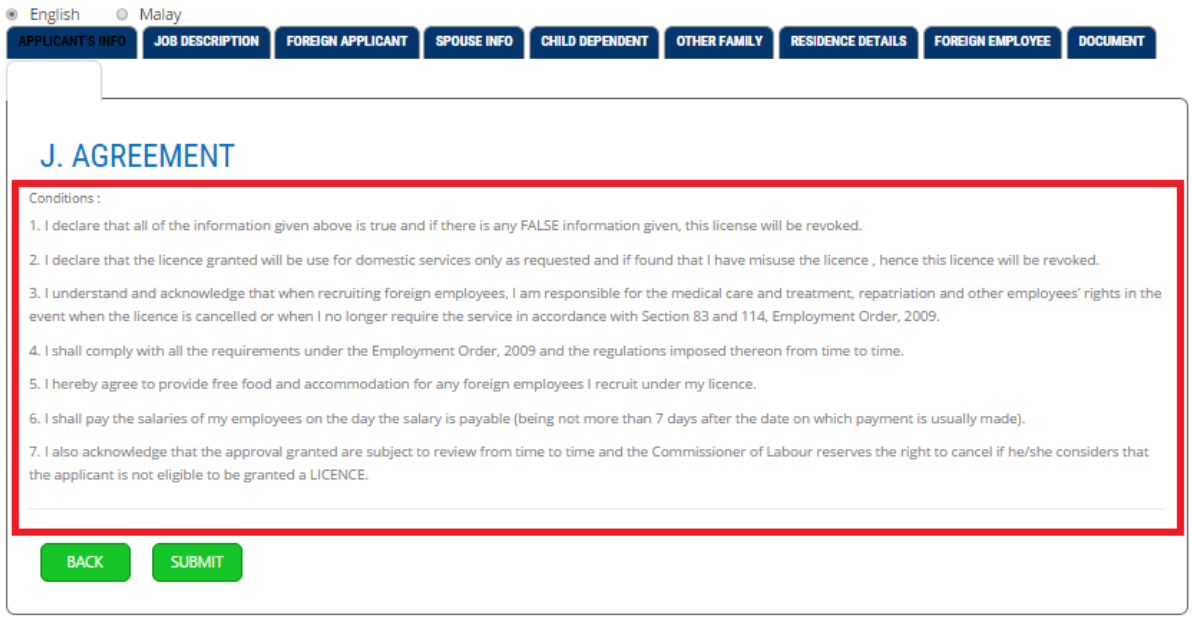
REMINDERS FOR ATTACHMENTS:

- Do not use the "**SAME**" FILE NAME for different attachments
- PLEASE avoid using "**Special Characters**" or "**Symbols**" for Applicant's file names (!@#$%^&*), but Applicant may use underscores " _ ".
- PLEASE PROVIDE the **Mandatory ATTACHMENTS**, and **if AVAILABLE**, provide the **Optional ATTACHMENTS** for a higher chance of success at applying.
- An example format shown below for Applicant's file names:
  "**IC_SCAN_COPY_APPLICANT_1**"
  "**BUR555_APPLICANT_SPOUSE**"

When ready, the Applicant may click "**Next**" to proceed to the next tab.

K. AGREEMENT

IN THIS TAB, APPLICANT **MUST CAREFULLLY READ** ALL THE **TERMS AND CONDITIONS** SET OUT BY THE DEPARTMENT OF LABOUR FOR PROCESSING THIS APPLICATION.

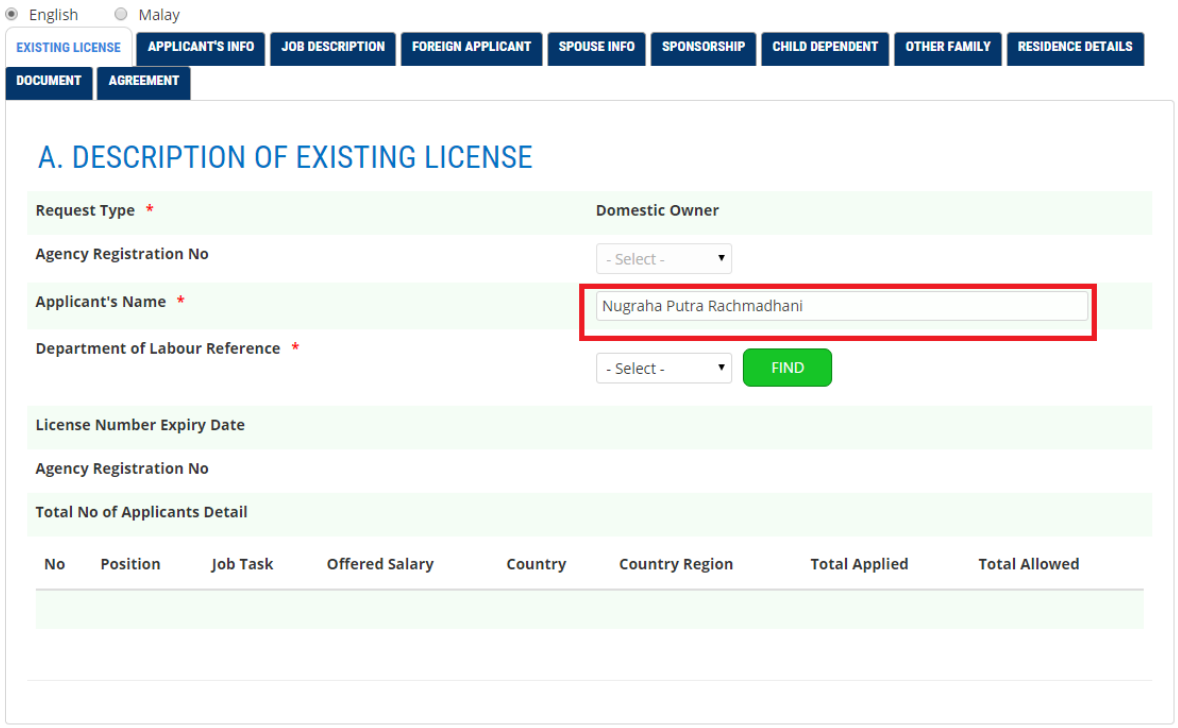


By Clicking "**SUBMIT**", Applicants **AGREE** to all of these **TERMS AND CONDITIONS** and the Application will be submitted for Processing.

3.8 DOMESTIC HELPER'S LICENSE (AMAH) ADDITIONAL FORM

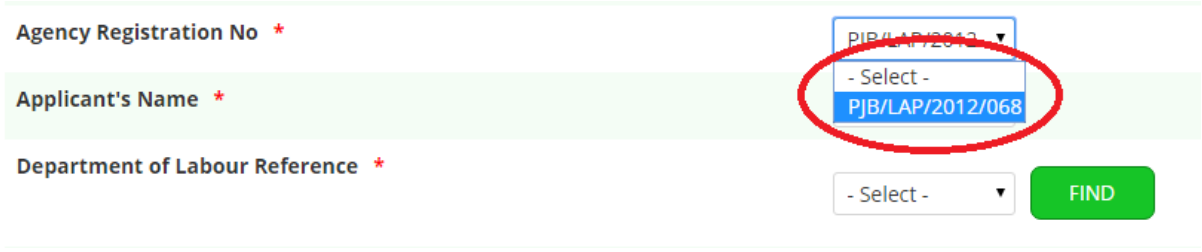
A. DESCRIPTION OF EXISTING LICENSE

(i) Similarly to New Applications, **Individuals can only apply Renewal** for their **own Licenses**.

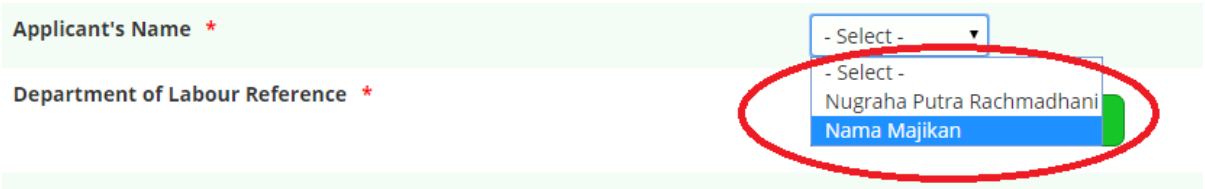


ALTERNATIVELY; if an employment agency is applying on behalf,

Employment Agencies MUST select their Agency Registration No:

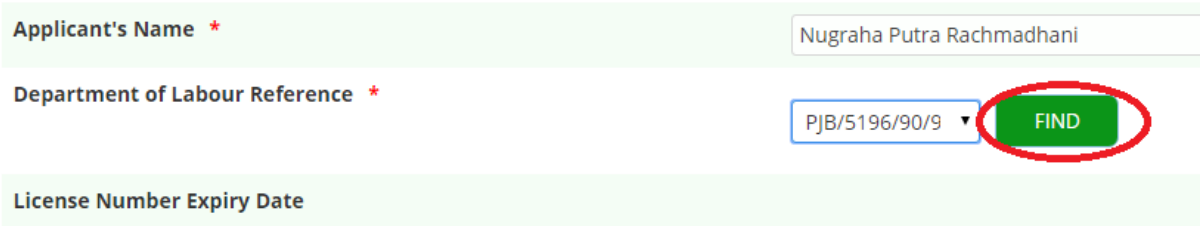


The Agency can then look up the list of "**Applicant Names**" whom have **SELECTED** or **NOMINATED** them to apply on their **behalf**.

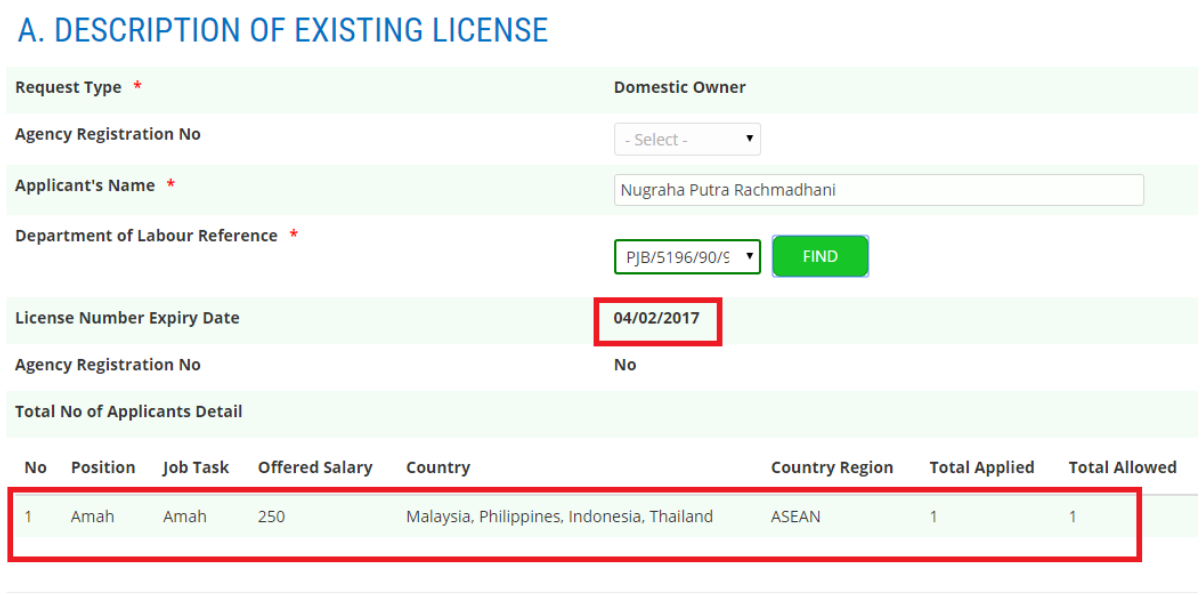


(ii) Applicant must then select their "**PJB**" License to **be Applied** for **Renewal.**

(iii) Applicant then should click on "**Find**".



(iv) After clicking on "**Find**", the **License Expiry Date** and **Amah License Details** will appear as shown below:



(v) Applicant **MAY NOT EDIT** these fields but is **only** able to **Review**, when ready click on "**Next**".

B. APPLICANT'S INFORMATION

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **APPLICANT'S INFORMATION** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

B. APPLICANT'S INFORMATION

Application Reference Number :	DHLNEW_10131
Applicant's Name	Nama Majikan
Identity Card Number	01234567
IC Colour	Yellow
Gender	Male
Date of Birth	08/03/1990
Citizenship	Bruneian
Religion	Islam
Status	Single
Mailing Address	Jalan 2 Menteri Besar
House Address	Jalan 2 Menteri Besar
District	Brunei Muara
Telephone Number	2226111/ 2226111/ 2226111

C. JOB DESCRIPTION

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **JOB DESCRIPTION** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

C. APPLICANT'S JOB DESCRIPTION

Occupation/Position	Managers
Department / Employer	Department of Labour
Address of the Department/ Employer	Jalan 2 Menteri Besar
Salary (Excluding Allowances)	$$3001-$5000
Salary Scale/ Division (If Applicable)	--
Other Income	--

BACK NEXT

Click on "**Next**" when ready.

D. SPOUSE INFORMATION

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **SPOUSE INFORMATION** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

D. SPOUSE INFORMATION

Wife / Husband's Name	Hafiz Hafizuddin
Please enter your IC number without "-"dash"	00057074
IC Colour	Yellow
Citizenship	BRUNEI
Religion	ISLAM
Department/ Employer	--
Employer Address	--
Salary (Excluding Allowance)	Under $500
Dependant Pass No./ Employment Pass No. (If applicable)	--

Click on "**Next**" when ready.

E. CHILD DEPENDENT

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **CHILD DEPENDENT'S INFORMATION** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

E. DETAILS OF CHILDREN LIVING IN THE SAME HOUSEHOLD

No	Name	Identity Card No / Birth Cert No	Gender	Date Of Birth	Occupation
1	Rodzy Mawar	00314295	Female	02/22/1987	NIL

Click on "**Next**" when ready.

F. OTHER FAMILY

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **OTHER FAMILY** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

F. DETAILS OF OTHER FAMILY MEMBERS LIVING IN THE SAME HOUSEHOLD

No	Name	Smart IC Number/Passport No	Relationship	Gender	Date Of Birth	Occupation
1	Arif Nasiruddin	01065900	CUCU	Male	07/25/2011	NIL
2	Armani Nasiruddin	00317152	ANAK MENANTU	Male	07/04/1987	SWASTA
3	Zahara Nasiruddin	01220930	CUCU	Female	05/24/2014	NIL

Click on "**Next**" when ready.

G. RESIDENCE DETAILS

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **RESIDENCE DETAILS** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

Click on "**Next**" when ready.

H. FOREIGN EMPLOYEE

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **PREVIOUSLY APPLIED AND APPROVED QUOTA INFORMATION** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.

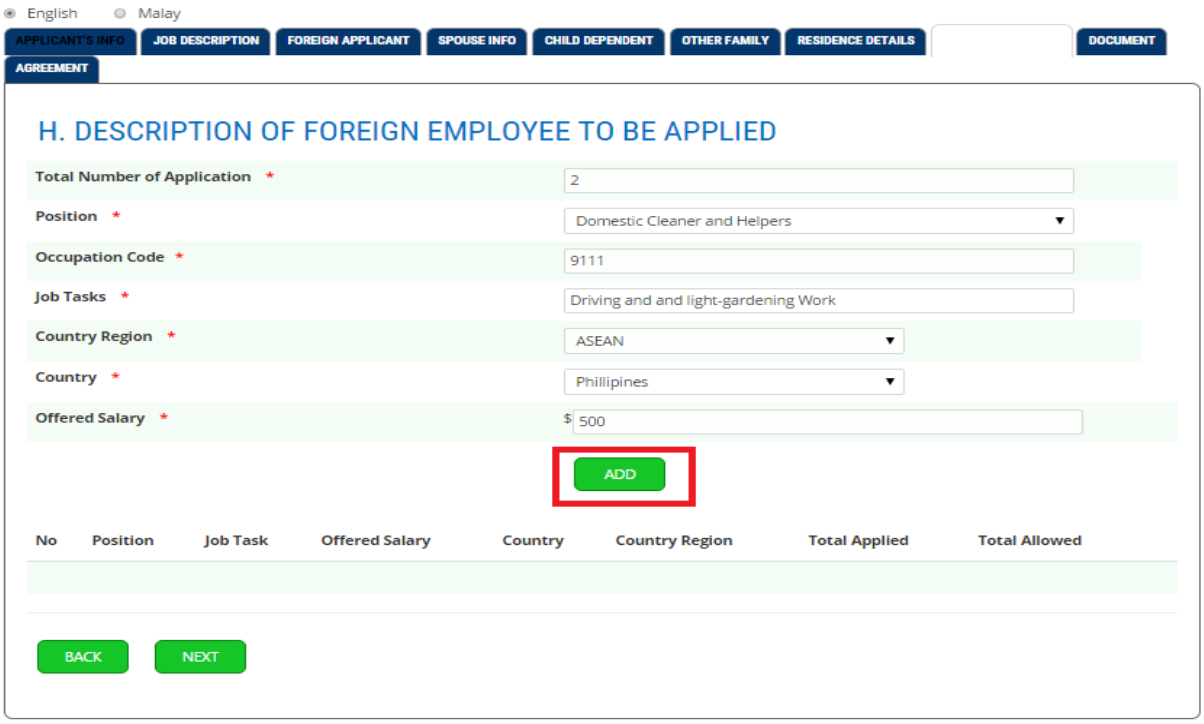
Click on "**Next**" when ready.

I. ADDITIONAL

THIS TAB IS **MANDATORY** FOR APPLICANTS OF ALL TYPES

Applicant MUST provide the information on the **ADDITIONAL AMAH** (Domestic Helper) QUOTA to be applied for this application:

Complete the table in similar fashion as STATED in "**DETAILS OF CHILDREN LIVING IN THE SAME HOUSEHOLD**" and "**DETAILS OF FAMILY MEMBERS LIVING IN THE SAME HOUSEHOLD**", which is to provide all of the requested information and click "**ADD**".



MANDATORY FIELDS	SAMPLE	NOTES
"**Total Number of Application"**	*"1"*	*Applicant must provide the Number of Amah to be applied.*
"**Position"**	*Domestic Helper*	*Applicant must select the Type of Amah to be applied from the Options available.*
"**Occupation Code**"	*AUTOMATICALLY SELECTED.*	*Applicant cannot select this field.*
"**Job Tasks**"	*Driving and light-gardening Work.*	*Applicant must DESCRIBE the job tasks of the Amah to be applied.*
"**Country Region**"	*Choose from Options Provided.*	*Applicant must select the REGION of Country from which the Amah is expected to be hired from.*
"**Country**"	*Choose from Options Provided.*	*Applicant must select the Country from which the Amah is expected to be hired from.*
"**Offered Salary**"	*"500"*	*Applicant must provide the SALARY which the Amah is expected to be paid.*
"**Reason for Additional**"	*House is too big and currently the Amah working at my residence has too much work.*	*Applicant must state the reason for the request of additional quota.*

OPTIONAL FIELDS	SAMPLE	NOTES
There are no optional fields in this tab	-	-

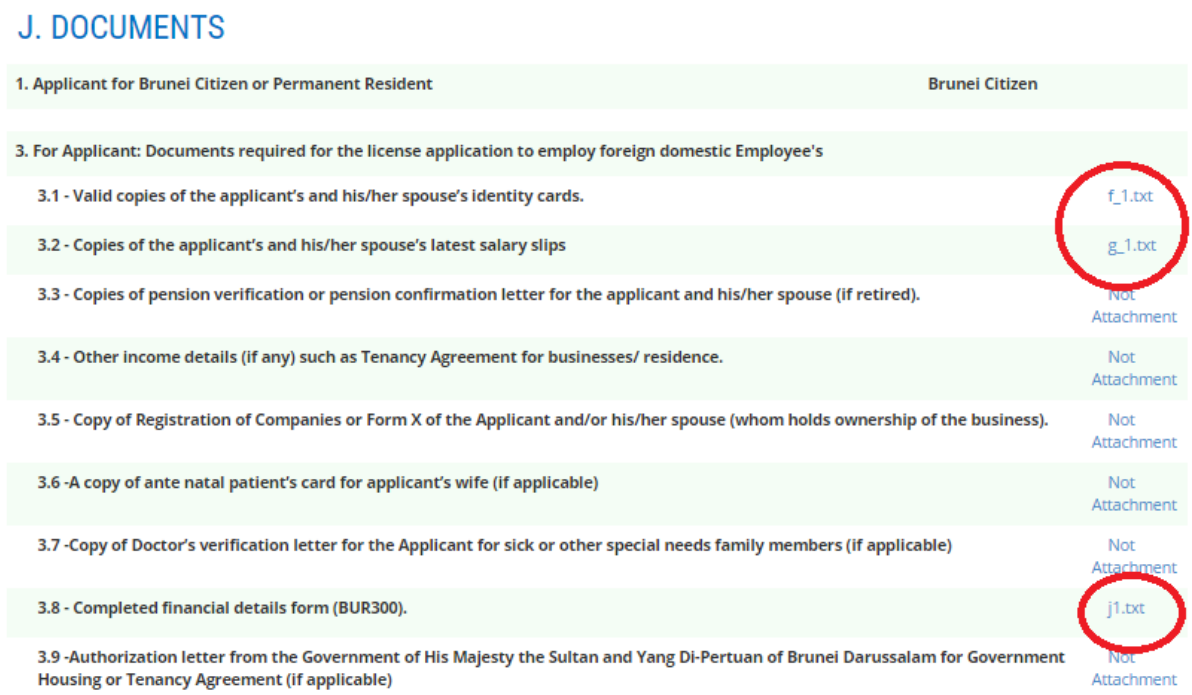
When the aplicant has provided all of the information, the applicant may click "**NEXT**" to move onto the next tab.

Click on "**Next**" when ready.

J. DOCUMENT

IN THIS TAB, APPLICANT IS ABLE TO **REVIEW** ALL OF THE **DOCUMENTATIONS** REGISTERED PREVIOUSLY USING THE DOMESTIC HELPER'S LICENSE APPLICATION FORM, BUT THE APPLICANT **MAY NOT EDIT** THESE DETAILS.

IF the applicant wishes to **EDIT** these information, it must be **APPROVED** by a Labour Officer, which the request will be sent to the **Labour LCS IT HELPDESK team**.



Click on "**Next**" when ready.

K. AGREEMENT

IN THIS TAB, APPLICANT **MUST CAREFULLLY READ** ALL THE **TERMS AND CONDITIONS** SET OUT BY THE DEPARTMENT OF LABOUR FOR PROCESSING THIS APPLICATION.

English Malay

APPLICANT'S INFO | JOB DESCRIPTION | FOREIGN APPLICANT | SPOUSE INFO | CHILD DEPENDENT | OTHER FAMILY | RESIDENCE DETAILS | FOREIGN EMPLOYEE | DOCUMENT

J. AGREEMENT

Conditions :

1. I declare that all of the information given above is true and if there is any FALSE information given, this license will be revoked.

2. I declare that the licence granted will be use for domestic services only as requested and if found that I have misuse the licence , hence this licence will be revoked.

3. I understand and acknowledge that when recruiting foreign employees, I am responsible for the medical care and treatment, repatriation and other employees' rights in the event when the licence is cancelled or when I no longer require the service in accordance with Section 83 and 114, Employment Order, 2009.

4. I shall comply with all the requirements under the Employment Order, 2009 and the regulations imposed thereon from time to time.

5. I hereby agree to provide free food and accommodation for any foreign employees I recruit under my licence.

6. I shall pay the salaries of my employees on the day the salary is payable (being not more than 7 days after the date on which payment is usually made).

7. I also acknowledge that the approval granted are subject to review from time to time and the Commissioner of Labour reserves the right to cancel if he/she considers that the applicant is not eligible to be granted a LICENCE.

BACK SUBMIT