

ANNEX A: EMPLOYEE DETAILS FOR WORKRIGHT INSPECTION

Note: Please provide the details of all employees involved in the inspection (Singapore Citizens, Singapore Permanent Residents, Foreign Workers and Part-timers) based on the latest (1 month) payroll details. Please ensure that they are present at the interview location on the day of inspection.

Name of Business Entity: _____

UEN: _____

Business Entity Email: _____

Contact No.: _____

Details of person completing this form

Name: _____

Date of Submission (of this form): _____

Designation: _____

Business entity stamp (if any):

Signature: _____

S/N	Name of Employee	NRIC / FIN / Work Permit No.	Contact No.	Occupation /Designation	Brief Job Scope	Date of Start of Employment	Monthly Basic Salary	Salary Period	Salary Payment Date
<i>E.g.</i>	<i>Kelvin Tan</i>	<i>S1234567A</i>	<i>91234567</i>	<i>Waiter</i>	Serving customers, taking food orders	<i>1 Jan 2018</i>	<i>\$2,100</i>	1 Jan to 31 Jan 2019	7 Feb 2019

Labour Relations and Workplaces Division
MOM Services Centre
1500 Bendemeer Road

Attn: Workright, Employment Standards Enforcement

Dear Officer

Letter of Authorisation

I, Name: _____, NRIC: _____,

Director/Partner/Sole-Proprietor of: _____ (*Name and UEN of business entity*),

hereby authorise:

Name: _____

NRIC/FIN: _____

Contact No.: _____

Designation: _____
(Please state "N.A" if the authorised representative is not an employee of the company)

Relationship: _____
(Please state "employee" if the authorised representative is employed by the company)

to represent the business entity on all matters / issues with regard to the Workright inspection held on
inspection date: _____.

Thank you.

Yours sincerely,

Signature of Employer*

Signature of Authorised representative*

Date:

Date:

Business Entity Stamp:

Note: *Any electronic signature (including any electronic image or symbol, or process for authenticating and creating electronic signatures) affixed by a person with the intention of signing this electronic record shall have the same legal validity and enforceability as a manually executed wet ink signature.

ANNEX C**Documents provided by Business Entity**

Name of Business Entity:	
UEN of Business Entity:	

List of documents produced for Workright Inspection

Documents	Employee #1	Employee #2	Document status*	Name of Software/System (If applicable)
1. Employee Name				
2. Employee NRIC/ FIN / WP No.				
3. Key Employment Terms (KETs) / Employment Contract	Y / N	Y / N	Scanned copy of original / Generated from business entity's software or system	
Number of pages: _____	Number of pages: _____			
4. Itemised Pay Slips	Y / N	Y / N	Scanned copy of original / Generated from business entity's software or system	
Number of pages: _____	Number of pages: _____			
Salary Period: _____	Salary Period: _____			
5. Scanned copies of NRIC/Work permit	Y / N	Y / N		
Number of pages: _____	Number of pages: _____			
Remarks (If any):				
Other documents				
Employee Details form (Annex A)	Y / N _____pieces		Remarks (If any):	
Letter of Authorisation (Annex B)	Y / N _____pieces		Remarks (If any):	

I declare that:

1. All electronic documents and records submitted are the originals and if any document or record is not the original, such document or record is a true and accurate duplicate of the original document or record.
2. All electronic documents and records were made by (or from information transmitted by) a person with knowledge of the business entity's software/system and the matters to which the electronic documents and records pertain to.
3. All electronic documents and records were made, kept and maintained by the business entity in the course of a regularly conducted business activity and the business activity made, kept and maintained such documents or records as a regular practice.
4. I am aware and agree to the use of the electronic documents and records as evidence in any court proceedings as proof of their contents.
5. I shall retain the originals of all softcopy documents or records submitted for this Workright Inspection for at least 1 year and produce the originals for verification upon MOM's request.
6. I understand that this submission is made to the Commissioner for Labour or an inspecting officer. The information in this submission is true and correct. I am aware that MOM may audit the business entity and/or take action against the business entity based on this submission. I understand that I may be investigated, charged in court or have to pay administrative penalties if I provide any false information in this submission.

Date: _____

Produced by:

Name and Signature of ***** Employer / Authorised Representative**

*Note *To delete as appropriate.*

*****Any electronic signature (including any electronic image or symbol, or process for authenticating and creating electronic signatures) affixed by a person with the intention of signing this electronic record shall have the same legal validity and enforceability as a manually executed wet ink signature.***