

Work Pass Division

18 Havelock Road
 Singapore 059764
 Tel: 6438 5122
 http://www.mom.gov.sg
 mom_wpd@mom.gov.sg



Request Form for Updates of Company Particulars

This form may require 5 minutes to fill in.

Instructions:

1. Please attach the following supporting document(s):
 - a. A clear copy of the ACRA Business Profile document
 - b. A clear copy of the NRIC of the registered Director/Sole Proprietor of the company (for requests to update company address)

2. You may fax the completed form **and** supporting documents to **6317 1060**. Incomplete forms and forms without the required supporting documents will not be processed.

Company Name : _____

Unique Entity Number (UEN)/ Registration No. (ACRA) : _____

Company General Information		
Description	Existing Details	New Details
Company Name[#] (without any change in UEN/ACRA Registration No.)		
Correspondence Address[#]		
Telephone / Fax number		
Business Activity		

Financial Details			
Paid Up Capital in \$SGD (ordinary shares only)			
Value of Turnover in the past 3 years (in \$SGD) <i>(Please start with the most recent year)</i>	Year	Value (\$)	Is the turnover figure from an audited account? <i>(For unaudited accounts or if employing company is exempted from audit, please select 'No'.)</i>
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

[#] If the company has any CPF account, you are also required to update CPF Board separately on this name change/ address change.

Full Name of ^ Director/ Sole Proprietor / Partner/
 General Manager / Personnel Manager of Company

^ NRIC No./ Passport No./ FIN

Date

Signature

Company Stamp

[^]Delete where inapplicable