

## **SERVICES & FEES SCHEDULE FORM B (FOR REPLACEMENT)**

PART A: Particulars of MDW Selected	Nationality:		Date:		
Name of MDW:	Basic Salary: Rest Day Comp:		np:	Gross Salary:	
	Passport No:		Name and WP No. of MDW Rep		laced:
PART B: Service Fee	S\$				
PART C: 3 <sup>rd</sup> Party Costs			Total Service Fees:		
			<u> </u>	101010011001	
Payment of Total Service Fee and Total 3 <sup>rd</sup> Party Costs shall be made as follows:  Total 3 <sup>rd</sup> Party Costs:					
1 Deposit - On confirmation of MDW through Biodata : Total Service Fees +					
2 Final Payment - When the MDW rep	orts for work :			3 <sup>rd</sup> Party Costs:	
PART D: Placement Fees					S\$
Downsont of Total Discoment Food shall be	made as follows:		Τ,	Total Placement Fees:	
Payment of Total Placement Fees shall be made as follows:  1 Deposit - On confirmation of MDW through Biodata:			<u> </u>	otal Placement Fees:	
2 Final Payment - When the MDW reports for work :				<b>Combined Total:</b>	
Replacement Notes:					
Replacement Notes.					
Payment Instructions:					
Confirmation By Employer Prepared by EA Personno					ol·
I confirm the MDW named in Part A and agree to pay the various fees stated in					iei.
Parts B, C and D.	ia agree to pay the valid	as rees stated III			
Signature of Employer:	Employer Name		E	A Reg No.:	
oyer Here			Signature of		
THE CONTRACTOR OF THE CONTRACT	NRIC / FIN		E.	A Personnel:	
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