[COMPANY LETTERHEAD]

Date: [DD/MMM/YYYY]

PENGARAH

BAHAGIAN KHIDMAT EKSPATRIAT

JABATAN IMIGRESEN MALAYSIA

NO. 15, ARAS 3 (PODIUM),

PERSIARAN PERDANA, PRESINT 2,

62550, PUTRAJAYA

Dear Sir,

**AUTHORISED PERSONS FOR TRANSACTIONS RELATING TO EXPATRIATE SERVICES FOR [COMPANY NAME]**

We refer to the above matter,

For the provision of the Expatriate Services (as defined in the aforesaid letter), please find below, the details of persons authorised to transact for and on behalf of our company (collectively, “Authorised Persons”), and the details of our company’s official correspondence address:

1. Authorised Person for Expatriate Services:

(a) Full name :

(b) NRIC / Passport no. :

(c) Designation :

(d) Contact no :

(e) E-mail address :

(f) Employee to your company/group of company: YES | NO [DELETE UNWANTED]

(g) Specimen signature :

3. Official Correspondence Address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facsimile No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Website Address (URL) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Company’s Stamp : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We confirm that the information provided above is true and accurate. We further confirm that we shall be fully responsible for all transactions conducted by the Authorised Person(s).

In addition, we shall indemnify and hold harmless the ISKANDAR REGIONAL DEVELOPMENT AGENCY (IRDA), its officers, employees, servants and/or agents from and against all costs, claims, damages, losses, expenses, demands, causes of action, proceedings of whatsoever nature, arising from, or to the extent contributed by our company, or by the Authorised Persons in conducting transactions relating to the Expatriate Services.

Yours faithfully,

[NAME OF COMPANY]

-Signature-

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Endorser

(a) Full name :

(b) NRIC/Passport no :

(c) Designation :

(d) E-mail address :

\*\* *Note:*

*Please remove remarks in BLUE in the printed contract.*