

PROCESS CONSTRUCTION & MAINTENANCE (PCM) SCHEME

FORM C: APPLICATION FOR DR FLEX

This form is to request EDB's support to:

- (C)** Flexibility to exceed prevailing local:foreign dependency ratio (DR) for EDB-supported process construction projects and major turnarounds

This application must be enclosed with copies of the contract(s) with the MNC(s) and Main Contractor(s) supporting this application.

Please note that any changes in the manpower requirements under Annex A would require a re-submission of Form C including:

- 1. A cover letter indicating the changes.**
- 2. Endorsement by MNC and Main Contractor (If the number of workers required is more than previously indicated in the first Form C submitted).**

***Re-submission of Form C should be done 1 month before the hiring of the project.**

Note: Company must have a process CPF number before making this application.

APPLICATION FOR EDB'S SUPPORT TO HIRE WORKERS UNDER THE PROCESS CONSTRUCTION AND MAINTENANCE (PCM) SCHEME BEYOND THE COMPANY-LEVEL DEPENDENCY RATIO (DR)

Name of contractor	
CPF No.	

Name of MNC Project / Owner	
Value of Contract with MNC or Main Contractor	
Start date of Contract	
End date of Contract	
NTS/PRC workers required above DR of 1:7 (please fill in details in Annex A)	

I declare that the facts stated in this application are true and that the foreign workers requested under this application will serve Process Construction and/or Maintenance activities only.

Name / Designation

Signature / Date

Company's Official Stamp

(A) ENDORSEMENT BY THE MAIN CONTRACTOR

(This section should be left blank, if your company is directly engaged by the MNC)

We _____ (Name of Main Contractor) (CPF: _____),
recommend that _____ (name of Applicant Company) be allowed
to recruit _____ (no.) foreign workers above their company DR for
_____ (name of project) from _____ (start of contract) to
_____ (end of contract).

Remarks:

I hereby support this application and certify that information furnished above and in Annex A is correct.

Name / Designation*

Signature / Date

Tel / Fax No.

Email

Company's Official Stamp

(B) ENDORSEMENT BY THE MNC

(Fill in (i) if part (A) has been left blank, (ii) otherwise)

(i) We _____ (name of MNC) (CPF No: _____),
recommend that _____ (name of Applicant Company) be
allowed to recruit _____ (no.) foreign workers above their company DR for
_____ (name of project) from _____ (start of contract) to
_____ (end of contract).

OR

(ii) We _____ (name of MNC) (CPF No: _____),
confirm that the above-mentioned Main Contractor is contracting with us for
_____ (name of project)

Remarks:

I hereby support this application and certify that information furnished above and in Annex A is correct.

Name / Designation*

Signature / Date

Tel / Fax No.

Email

Company's Official Stamp

**Authorized personnel*

Annex A: Manpower requirements

Name of MNC Project / Owner	
Value of Contract with MNC or Main Contractor	
Start date of Contract	
End date of Contract	

	1Q 08	2Q 08	3Q 08	4Q 08	1Q 09	2Q 09	3Q 09	4Q 09
(A) No. of full-time Singaporeans/PRs in the company								
(B) Projected no. of NTS/PRC workers required								
(C) No. of NTS/PRC workers that may be hired within DR of 1:7 (A x 7)								
(D) Projected quota needed (B - C)								

Please insert more columns and correct the timeline if need be.

Please submit this form to:

Resource Development Division
Economic Development Board
#18-00 Raffles City Towers
250 North Bridge Road
Singapore 179101

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