

POLICY NO:

UNITED OVERSEAS INSURANCE LIMITED
3 ANSON ROAD
#28-01 SPRINGLEAF TOWER
SINGAPORE 079909

Dear Sirs

Letter of Indemnity

IN CONSIDERATION of your issuing a Letter of Guarantee No.....on behalf ofofin favour of the Controller of Immigration, Immigration Department, Singapore for the sum of SINGAPORE DOLLARS Five Thousand (S\$5,000) for the security deposit required by the said Controller of Immigration from the saidof for the period from to in connection with the Security Bond dated _____ made under Regulation 21 of the Immigration Regulations, 1972, I/we hereby undertake jointly and severally to indemnify you against any loss and/or damage whatsoever which you may sustain by reason of the issue of the said Letter of Guarantee at our request.

I/We jointly and severally agree that this undertaking shall not be discharged or released by any arrangements that you make with any or all of us, with or without the consent of the others in respect of the alteration in the obligations undertaken by each of us hereunder, or in any forbearance whether as to payment, time, performance or otherwise.

And I/we hereby jointly and severally undertake to deposit immediately as security in respect of this indemnity, a sum not exceeding SINGAPORE DOLLARS Five Thousand (S\$5,000) at any time you may require of any of us during the currency of this Indemnity, provided that the total security so deposited shall not exceed in the aggregate, the sum of SINGAPORE DOLLARS Five Thousand (S\$5,000)

I/We jointly and severally agree that our undertaking given in this indemnity is irrevocable and shall remain in force and effect until your own liabilities arising under the Letter of Guarantee No..... given by you, have been fully determined, and such Letter of Guarantee released and returned to you for your cancellation.

Dated this _____ day of _____

Yours faithfully

In the presence of:-

(Signature of the Employer)

Name :
NRIC :
Address :
Occupation:

(Signature of Witness)

Name :
NRIC :
Address :
Occupation :

(Signature of Local Guarantor)

Name :
NRIC :
Address :
Occupation :

(Signature of Witness)

Name :
NRIC :
Address :
Occupation :