

Address in Country/Place of Origin/Residence

Country/Place of Origin/
Residence:

Division/State/Province
of Origin/Residence:

Prefecture of Origin/
Residence:

County/District of Origin/
Residence:

Address: _____

PART II – OTHER DETAILS

Email Address:

Contact Number:

Occupation:

Highest Academic/
Professional No Formal Education Primary Secondary Pre-University
Qualifications Attained:* Diploma University Post-Graduate

Annual Income in
Singapore dollars (SGD):

Religion:

Expected Date of Arrival in Singapore: ——
D D M M Y Y Y Y

Type of Visa:* Single Journey Double Journey Triple Journey Multiple Journey

Purpose of visit:* Social Business

Details of purpose: _____

How long do you intend to stay in Singapore:* Less than 30 days More than 30 days

If your intended stay in Singapore is more than 30 days, please state the reason for your intended length of stay and the duration

PART III – PARTICULARS OF LOCAL CONTACT

Details of Local Contact or Company/Hotel in Singapore

**Name of Local Contact
/Company/Hotel:**

**Relationship of
Local Contact/Company/
Hotel to
Applicant:**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Contact No.: _____

Email Address: _____

PART IV – ANTECEDENT OF APPLICANT*

- (a) Have you ever been refused entry into or deported from any country/place, including Singapore? Yes No
- (b) Have you ever been convicted in a court of law in any country/place, including Singapore? Yes No
- (c) Have you ever been prohibited from entering Singapore? Yes No
- (d) Have you ever entered Singapore using a different passport or name? Yes No

If any of the answer is “YES”, please furnish details below

PART V - DECLARATION BY APPLICANT

I declare that all information submitted in this application is true, accurate and complete to the best of my knowledge and belief. I understand that, if I have concealed relevant information or provided false, inaccurate or misleading information, I may be prosecuted and any facilities, rights or privileges granted under this application may be withdrawn.

I undertake not to misuse controlled drugs or to take part in any political or other activities during my stay in Singapore which would make me an undesirable or prohibited immigrant under the Immigration Act 1959.

I undertake to comply with the provisions of the Immigration Act 1959 and any regulations made thereunder or any statutory modification or re-enactment thereof for the time being in force in Singapore.

I undertake not to involve in any criminal offences in Singapore.

I undertake not to indulge in any activities which are inconsistent with the purpose for which the immigration passes have been issued

I further undertake not to be engaged in any form of employment, business or occupation whilst in Singapore without a valid work pass issued under the Employment of Foreign Manpower Act 1990.

I am aware that overstaying or working illegally in Singapore is a serious offence and on conviction, the penalties may include mandatory imprisonment and caning.

I understand that if the Controller of Immigration is satisfied that I or any member of my family breaches this undertaking or becomes an undesirable or prohibited immigrant, he will cancel my immigration pass and the passes of the members of my family, and we may be required to leave Singapore within 24 hours of such cancellation.

I understand that this application for and possession of a visa does not guarantee entry into Singapore and permission to entry is entirely discretionary at the point of entry.

I give my consent for your department to obtain and verify information from or with any source as you deem appropriate for the assessment of my application for immigration facilities.

_____ Date

_____ Signature of Applicant

Date:

Singapore Consulate General
in Hong Kong Special Administrative Region
Unit 901, 9th floor,
Admiralty Centre, Tower I,
18 Harcourt Road,
Hong Kong.

Dear Sir / Madam,

Re: Authorization Letter

I hereby authorize the below person to submit and collect my Singapore Visa
on my behalf:

Name of the person: _____

HKID Card Number: _____

Contact Number: _____

Should you have any questions, please do not hesitate to contact me at

Applicant's Phone No.:

Yours faithfully,

Applicant Full Name:

HKID#