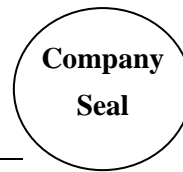


Application for Certified True Copy of the Licence

To: Commissioner for Labour
(Employment Agencies Administration)

We _____ (Name of employment agency) _____, would like to apply for a certified true copy of the employment agency licence from _____ (date) to _____ (date) for _____ (reason) _____.



Signature and Name of Licensee / Director / Nominated operator*

Date

(If the licensee is a limited company,
the seal of the company is required)

*Delete whichever is inappropriate