



**DOL CHECK LIST FORM**

**Work Permit Fee and Tax**

[16, 000 VT - Application Fee]

[16, 000 VT - Exemption (Application Fee Only) – One Day to One Month Permit - Not Renewable]

[64, 000 VT - Temporary Work Permit (Application Fee Included) One Month to Four Months Permit - Not Renewable]

[280, 000 VT – Valid Permit For 1 Year]]

[280, 000 VT – Renewal of Valid Permit for 1 Year]

**NOTE: FEES ARE NOT REFUNDABLE. TAX IS NOT REFUNDABLE IF APPLICATION IS REFUSED.**

**CHECK LIST ON WORK PERMIT APPLICATION(S)**

For the issue of new applications being exemption, temporary and valid permit for 1 year or the renewal of a valid work permit for 1 year.

**[Official Use Only]**

<b>TYPE OF PERMIT: (Tick One Only)</b>	<input checked="" type="checkbox"/>
I. Exemption	<input type="checkbox"/>
II. Temporary	<input type="checkbox"/>
III. Valid Permit for 1 Year	<input type="checkbox"/>
IV. Renewal of Valid Permit for 1 Year	<input type="checkbox"/>
V. Change of Employer	<input type="checkbox"/>
VI. Change of Employment Status	<input type="checkbox"/>
VII. Replacement Permit	<input type="checkbox"/>

<b>EXEMPTION</b>
Date Accepted:
Officer Accepting:
Work Permit Fee Paid: YES / NO
Cash:
Cheque No:
Cover Letter Explanation Provided: YES / NO
Copy of Flight Itinerary Provided: YES / NO
Copy of Passport Provided: YES / NO
Letter from PIO provided YES / NO
Copy of Residence Permit for Residents YES / NO

<b>TEMPORARY</b>
Date Accepted:
Officer Accepting:
Work Permit Tax Paid: YES / NO
Cash:
Cheque No:
Cover Letter Explanation Provided: YES / NO
Copy of Flight Itinerary Provided: YES / NO
Copy of Passport Provided: YES / NO
Letter from PIO provided YES / NO
Copy of Residence Permit for Residents YES / NO

<b>PERMANENT</b>
Date Accepted:
Officer Accepting:
Application Fee Paid: YES / NO
Work Permit Tax Paid: YES / NO
Cash:
Cheque No:
Cover Letter Explanation Provided: YES / NO
Work Permit Card attached for Renewal YES / NO
Position Advertised : YES / NO
2 Passport Size Photos Provided : YES / NO
Qualifications and Reference copies Provided YES /NO
Copies of Written Contract Provided YES / NO
Counterpart's Training Plan Provided: YES / NO
Interview Report Provided: YES / NO
Copy of Residence Permit Provided: YES / NO
Copy of Passport Provided YES / NO

**TO BE FILLED OUT BY APPLICANT or AGENT**

**INCOMPLETE FORMS WILL NOT BE CONSIDERED**

**APPLICANT DETAILS**

Surname:	First Name:
Nationality:	
Postal Address:	
Telephone No:	
Residency Status: Expatriate Residence / Overseas Resident	
If Expatriate Resident Provide Resident Permit No:..... Dated Issued:..... Date Expired: .....	
If Overseas Resident - Police Clearance Provided YES / NO	
If Overseas Resident - Last Employment Record and References Provided YES / NO	

**EMPLOYER DETAIL**

Legally Registered Name (in full):	
Trading Name (if used):	
Type of Business:	
Postal Address:	
Telephone No:	Fax No:
Registration Papers or Articles of Association provided: YES / NO	
Bankers Reference provided: YES / NO	
Reference from a Vanuatu professional Body (Lawyer, Accountant, VIPA) provided: YES / NO	
Paid up Capital: VT.....	

**LIST OF COMPANY OWNERS**

NAME	SHARES HELD	POSTAL ADDRESS

**LIST OF COMPANY DIRECTORS**

NAME	SHARES HELD	POSTAL ADDRESS

**AGENT DETAILS (if an agent is being used)**

Legally Registered Name (in full):	
Trading Name (if used):	
Postal Address:	
Telephone No:	Fax No:
Name of Person processing application: Mr. Mrs. Miss.	

**DETAILS OF WORK PERMIT**

If applicant currently holds an existing work permit;

Type of Work Permit: Exemption / Temporary / One Year Permit
Date Work Permit Issued: / / Date Work Permit Expires: / / Work Permit Card No:
Date Residency Permit Issued: / / Date Residency Permit Expires / / Residency Permit No:
How many Extensions / Renewals have been issued:
Has a Local Counterpart been identified for training of this post: YES / NO
If Yes, please specify details of training below;

I / we hereby apply to seek the granting of a work permit to Mr. / Miss. / Mrs. ....

**STATEMENTS**

**APPLICANT**

I ..... declare that the above information is true to the best of my knowledge.

Signature: ..... Date: .....

Witness' Signature and Initials: .....

**AGENT**

I ..... declare that the above information is true to the best of my knowledge.

Signature: ..... Date: .....

Witness' Signature and Initials: .....

[Official Use Only]

**CHECKLIST OF OTHER APPROVALS RELATING TO THIS APPLICATION**

DEPARTMENT	DATE RECEIVED	DATE COMPLETED	REMARKS
Front Desk Officer			
Secretary HQ			
DLO			
SLO- M&T			

*This part is reserved only for the Commissioner of Labour*

Application; Approved / Refused on (date) .....

Comments: .....

.....

.....

Signature: \_\_\_\_\_  
**Lionel KALUAT**  
Commissioner of Labour