## **TEMPORARY ACCOMMODATION DETAILS**

Agency Name: Complete Address of the Temporary Accommodation:	
Name of the person i	n charge:
Contact number:	
Is the office and boar	ding house located in the same address?
When did you start us	sing this facility as boarding house?
Size:	No.of rooms:
No. of Beds:	No.of rooms: Maximum Occupancy:
Other amenities/facili conditions:	ities to ensure decent and humane living
•	erves as boarding house only?
If no, please provide de	etails:
Is the accommodatio	n shared with other agencies?
	details and name of the sharing agency:

## **DECLARATION & UNDERTAKING**

I HEREBY DECLARE that all the information provided in this form is complete, true and correct. I should likewise update the Migrant Workers Office (MWO) in Hong Kong in case of any changes. I HEREBY UNDERTAKE that the following regulations shall be complied at all times:

## a. <u>Department Circular No. 1 of the Department of Migrant Workers</u> Rule XV, Section 101

"All accommodation facilities provided by either the Philippine Recruitment Agency or the foreign principal/employer shall provide OFWs with adequate provisions such as food, drinking water, beds, blankets, toilet facilities and other amenities to ensure decent and humane living conditions, free of charge...."

## b. <u>Code of Practice (CoP) for Employment Agencies (EAs) of the</u> <u>Hong Kong Labour Department</u>

Section 3.7.2 "Should EAs use their EA premises to provide boarding facilities or bedspaces (especially for job seekers like foreign domestic helpers (FDHs) who come from outside Hong Kong), or provide such facilities in other non-EA premises to job seekers, they must ensure that relevant approval(s) or license(s) for operating the boarding facilities or bed spaces have been obtained from all relevant government departments and related organizations, and the prescribed standards in respect of building structure, fire safety as well as health and hygiene as specified in the relevant laws of Hong Kong and/or any other licensing requirements as devised for such facilities (if applicable) are fully and satisfactorily met at all times..."

FURTHER, I HEREBY ACKNOWLEDGE the authority of the MWO to evaluate and make necessary recommendations on the merit of my accreditation, and impose disciplinary actions should there be misrepresentation/ inconsistencies on the provided information.

Signature over printed name of the Agency License Holder and Agency Chop

Date:\_\_\_\_\_