



Service Agreement between Employment Agencies and FDH Employers

This Agreement is made on _____ between **ZenCare Employment Resolve** and the undersigned client (i.e. FDH employer) whose personal particulars are set out in Parts I and II.

Part I: Information of FDH Employer

Name in Chinese:
Name in English:
Telephone no.:
Email address:
Residential address:

Part II: History of Employing FDHs in the Past Two Years (to be completed by FDH Employer)^

Name of FDH	Employment period	Reason for contract termination

Part III: Type of FDH Sought#

☐ Recruit FDH from overseas ☐ Recruit FDH already working in HK ☐ Contract renewal	☐ Direct Hire ☐ Others (please specify): _____
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Part IV: Service Charge Details@

(A) Fee related to processing the FDH's visa: \$ _____, which covers the following services as marked with "✓"	
☐ Contract notarisation fee at the Consulate ☐ 2-year Overseas Workers Welfare Administration (OWWA) fee for Filipino FDH ☐ Others (please specify): _____	☐ Visa fee and departure expenses at the domicile of the FDH ☐ HK visa fee (chargeable by the HK Immigration Department) ☐ Others (please specify): _____
(B) Fee related to arranging the FDH's arrival in Hong Kong: \$ _____, which covers the following services as marked with "✓"	
☐ One-way airfare to HK (as required by the SEC)	☐ Arranging the FDH to report for duty to the Consulate

☐ Airport pick-up upon FDH's arrival

☐ FDH's HKID card application (HKID card application at the HK Immigration Department is free of charge)

☐ Others (please specify): _____

(C) Fee related to medical examination or insurance: \$ _____, which covers the following services as marked with “✓”

- | | |
|---|---|
| ☐ Medical examination in FDH's home country ^{Note 1}
Tests include:
HIV I & II antibodies (AIDS)/Sexually transmitted diseases/VDRL/Chest X-ray/Pregnancy test/HbsAg/
Others (Please specify)* _____ | ☐ Medical examination in HK ^{Note 1}
Tests include:
HIV I & II antibodies (AIDS)/Sexually transmitted diseases/VDRL/Chest X-ray/Pregnancy test/HbsAg/
Others (Please specify)* _____ |
| ☐ Mandatory insurance as required by the Philippine Government | ☐ Employees' compensation insurance in Hong Kong for 1 year/2 years* |
| ☐ Others (please specify): _____ | |

(D) Fee related to employment of the FDH: \$ _____, which covers the following services as marked with “✓”

- | | |
|---|--|
| ☐ FDH in-service follow-up and counseling services
☐ Translation, allograph and consultation services on labour legislation
☐ Others (please specify): _____ | ☐ FDH work manual
☐ Useful forms for employers (e.g. wages and holiday receipt) |
|---|--|

(E) Fee for services other than those in category (A) to (D) above: \$ _____, which covers the following services as marked with “✓”

- ☐ Others (please specify): _____

Total service charge : (A) + (B) + (C) + (D) + (E) = \$ _____

Part V: Payment Schedule[#]

- | | |
|--|---|
| ☐ Payment in full upon selection of FDH
☐ Payment in full upon completion of recruitment service
☐ Other (please specify): _____
_____ | ☐ By _____ installments:
1 st installment (\$ _____) due by (date) _____
2 nd installment (\$ _____) due by (date) _____
3 rd installment (\$ _____) due by (date) _____
4 th installment (\$ _____) due by (date) _____ |
|--|---|

Part VI: Refund/Other Arrangements if Services are not Delivered in Full or FDH Fails to Report for Duty[#]

Refund/Other arrangements* (e.g. replacement of FDH and whether additional fees will be charged) (please specify)
if services are not delivered in full or the FDH fails to report for duty:

☐ If the FDH fails to obtain an employment visa: _____

☐ If the employer's application is not approved by the authorities:

☐ If the FDH fails to report for duty:

☐ If the FDH's actual date of reporting for duty is different from the agreed date:

Part VII: Terms of Guarantee if Employer Initiates Premature Termination of Contract#

Arrangements for premature termination of contract initiated by the employer within the two-year contract period after the FDH has reported for duty:

☐ Guarantee period: _____ months Fee for replacement of FDH: \$ _____ for _____ a maximum of _____ times during the guarantee period Additional conditions (if any, please specify): _____ _____	☐ No guarantee period
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Part VIII: Refund/Other Arrangements if FDH Initiates Premature Termination of Contract#

Refund/Other arrangements* (e.g. replacement of FDH and whether additional fees will be charged) (please specify) for premature termination of contract initiated by the FDH within the two-year contract period after he/she has reported for duty:

☐ If the FDH prematurely terminates the contract within the first _____ month after reporting for duty:

☐ Other scenario(s) (please specify): _____

Part IX: Other Terms and Conditions of this Service Agreement

<List other terms and conditions of this Service Agreement here>

Part X: Brief Client on the Standard Employment Contract (SEC) (to be ticked and signed by client) #

The employment agency representative has explained to me the content of the SEC and I confirm understanding of the terms therein.

Signature of Client/Date

 Signature of Client
 (FDH Employer)

 Name of Client (FDH Employer)

 Date:

 Signature of Employment
 Agency Representative

(Name: _____)

(Position: _____)

 Date:

 Company Chop of
 Employment Agency

Part XI: Consent for Disclosing Part II of this Agreement to Prospective FDHs to Whom the Employer Intends to Offer Employment#

☐ I, _____, agree that **ZenCare Employment Resolve** may disclose my history of employing FDHs in the past two years to the prospective FDH(s) to whom I intend to offer employment as my FDH(s).

Part XII: Information of FDH (with resume attached) and the Expected Timeline for Processing the Application (Fill in when the suitable FDH is selected) #

Name: _____

Nationality: _____

HKID/Passport* No.: _____

Stages of Application	Expected Date of Completion
Contact FDH/Overseas intermediaries to verify information, arrange for signing of the SEC, medical examination, etc.	
Submit application to the Consulate of FDH's home country in Hong Kong for notarisation of the SEC (if necessary)	
Submit application for employment visa to the HK Immigration Department	
Arrange for visa and departure at the domicile of FDH	
FDH reporting for duty	

The employment agency representative has given the copy of the resume of the selected FDH to me.

Signature of Client
(FDH Employer)

Signature of Employment
Agency Representative

Company Chop of
Employment Agency

Name of Client (FDH Employer) (Name: _____)
Date: _____ (Position: _____)
Date: _____

Note 1: According to the Code of Practice on Employment under the Disability Discrimination Ordinance published by the Equal Opportunities Commission, employers who require job seekers to undergo medical examination should ensure that the medical information is relevant to the particular duties and responsibilities of the job, and should be obtained only if it is necessary to ascertain that the person is able to carry out the inherent requirements of the job.

- Note 2: This is a sample document for reference only. Parties referring to this sample should ensure that its contents are appropriate for their use before adoption. They are also reminded to seek independent professional advice where appropriate.
- Note 3: According to the Employment Ordinance and the Employment Agency Regulations, the maximum commission which may be received by an employment agency from a job seeker shall be an amount not exceeding a sum equal to 10% of the first-month's wages received by the job seeker for each employment that he/she has been successfully placed by the employment agency. The provisions are applicable to **all** job seekers.

* Please delete where appropriate

Please “✓” as appropriate

@ The amount of fee set for each service category must be specified; “✓” as appropriate.

^ Information in this section is to be provided by FDH Employer on a voluntary basis and will be released to prospective FDHs to whom the employer intends to offer employment.

