

Computerized OEP/Partner Card Request

To be filled by Overseas Employment Promoter:											
Licence Title:	M/s						Paste Passport size picture of OEP/ Partner with White Background				
OEP Licence No:											
Valid Upto:											
Licence Type:											
<input type="checkbox"/> Sole Proprietor				<input type="checkbox"/> Registered Company				Partnership basis			
								<input type="checkbox"/> Managing Partner			
								<input type="checkbox"/> Partner			
Name of Person:											
CNIC:											
Provide Three (03) Specimen Signatures of OEP/ OEP Partner											
Regional Office Use Only											
<ul style="list-style-type: none"> • All information provided above is correct as per the official record. 											
P.E Office Location											
Date: ____ - ____ - ____ DD MM YYYY				Authorized Signature				Authorized Stamp			
Directorate of Operation Use Only											
<ul style="list-style-type: none"> • Submitted with the request to print the OEP Card as per information provided above. 											
Reference Number											
Date: ____ - ____ - ____ DD MM YYYY				Authorized Signature				Deputy Director (Ops)/Authorized Officer			