**Migrant Workers Office - Taipei, TaiwanI**

**DEATH CASE - 死亡案件**

**INFO/ DATA REQUIREMENTS信息 / 數據要求**

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| **INITIAL REPORT首次報告** |  |
| 1.COMPLETE NAME OF THE DECEASED/勞工死者全名 |  |
| 2. NAME OF COMPANY / EMPLOYER/  雇主姓名/ 僱主名簿 |  |
| 3. PLACE OF WORK IN TAIWAN / 公司，僱主地點 |  |
| 4. TAIWAN BROKER台灣仲介名簿：  TELEPHONE NUMBER: 連絡電話 : |  |
| 5. DATE OF DEATH 死亡日期： |  |
| 6. PLACE/LOCATION OF DEATH (Encircle the state details on the Right Column) |  |
| 1. COMPANY/WORKPLACE 死亡地點/位置 2. DORMITORY 宿舍 3. HOSPITAL醫院 4. RESIDENCE OF EMPLOYER 僱主居所 5. OTHERS其他 |  |
| 7. SUSPECTED CAUSE OF DEATH嫌疑死亡原因 |  |
| **ADDITIONAL INFORMATION FOR FOLLOW-UP REPORTS更多信息為後續報告** |  |
| 1. NAME OF PRA 菲律賓仲介公司 |  |
| 1. DATE OF DEPLOYMENT ( 出境日期) |  |
| 1. PLACE OF ORIGIN / RESIDENCE IN THE PHILS 場地，菲律賓地址 |  |
| 1. NAME AND TEL NO OF FAMILY/ RELATIVE (encircle then state details on the right column) 家屬/ 親戚名字及連絡電話 |  |
| 1. DATE / DETAILS OF REPATRIATION 遣返日期 2. DATE AND TIME OF ARRIVAL IN PHILS時間到機場 3. NAME OF CARRIER / FLIGHT NUMBER航空/ 航班 4. CONSIGNEE / CONTACT PERSON IN PHILS聯絡人 5. NAME 名字 6. RELATIONSHIP (關係) 7. TELEPHONE NUMBER (連絡電話) |  |

備註 : 請另附上移工相關文件如：護照、居留證、勞動契約、及其他相關文件 (意外/診斷書)

*Note: Please attached photocopy of Passport，ARC，Employment Contract and other relevant documents (incidents / medical reports) \*\*\*Migrant Workers Office , OWWA Contact Number: 02-26588299 Fax- 02-26589123*