LMRA هيئة تنظيم سوق العمل

# Change of Employer Status Application Form

Application Date

Day – Month – Year

## From (Old CR/Branch)

**CR / Unit No.**

**Establishment / Unit Name**

## To (New CR/Branch)

**CR / Unit No.**

**Establishment / Unit Name**

## Number of foreigners to be transferred

☐ Employees ☐ Dependants ☐ Visit Visas

## Reason for change of employer status (select one)

☐ Sale ☐ Update of CR or Establishment or branch ☐ Others (specify below)

## Old Owner's Approval

**Old CR / Branch**

**Authorised Person Name**

**Signature & Company Stamp**

**CPR No.**

## New Owner's Approval

**New CR / Branch**

**Authorised Person Name**

**Signature & Company Stamp**

**CPR No.**

## Declaration

I declare that

- The information provided in this form and all the attached pages are correct
- The New CR Owner will be liable for any commitment towards LMRA by the Old CR Owner
- I understand that it is an offence to retain workers in a CR/Branch that has become Inactive
- I understand that the employment of expat workers in the new CR/Branch is subject to its **Bahrainisation target**

☐ **Responsible Person** ☐ **Agent**

**Name** **Signature** **CPR No.**

Office Phone No. Mobile Phone No.

## Employees' Information

| No. | Employee Name | CPR No. | Passport No. | Nationality | Visa Type | |
|---|---|---|---|---|---|---|
| | | | | | Employment | Dependant |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

## Required Documents & Terms

1. Fill the Foreign Employees' Block Transfer Form.
2. Present Applicant's CPR / ID Card.
3. A letter from the Business Owner requesting the transfer from the old to the new CR.
4. If the transfer is more than 10 foreigners, provide a list of all foreign employees and thier family members that will be transferred. (List should include Name, CPR No., Passport No., Nationality and Visa type)
5. Copy of the new and the old CR.
6. Copy of the electricity bill of the new CR.
7. Copy of the Passport, CPR and Residence Permit of the foreign employee and thier family members (if any).

**In case of transfer from a branch to another, the below conditions applies:**

1. The new branch should not have any violations.
2. The new branch should be able to accommodate the new workers in the **Bahrainization rate (Bahrainization Calculator)**.

## For Official Use Only

| | | |
|---|---|---|
| **Application received by** | **Signature** | **Date** Day – Month – Year |
| **LMRA Approval** | **Signature** | **Date** Day – Month – Year |
| **GDNPR Approval** | **Signature** | **Date** Day – Month – Year |