Work Pass Division

18 Havelock Road Singapore 059764 Tel: 6438 5122 www.mom.gov.sg mom_wpd@mom.gov.sg



Annex A Employer and Spouse Income Tax Declaration

This form may take you 1 minute to fill in.	
Please complete this form only if you do no applying for a Work Permit (WP) for a foreign of	ot wish to submit your Income Tax Notice of Assessment when domestic worker.
Part I – Monthly Combined Income of Employe	er and Spouse
Please tick (\checkmark) the appropriate box.	
☐ Below \$2,000 ☐ \$2,000 to \$2,499	9 □ \$2,500 to \$2,999 □ \$3,000 to \$3,499
□ \$3,500 to \$3,999 □ \$4,000 to \$4,999	
□ \$8,000 to \$9,999 □ \$10,000 to \$12,4	
□ \$20,000 to \$24,999	A STATE OF THE STA
Part II – Authorisation by Employer and His/He	er Spouse
If either you and/or your spouse do not wish to complete Part II and authorise the Comptroller of communicate the results of the verification to the	o submit a copy of your Income Tax Notice of Assessment, please of Income Tax to verify your income range stated in Part I above and Controller of Work Passes.
I, <u>Sim Kwona Mian</u> (Name) of employer)	, *NRIC/WP No/FIN: <u>\$019</u> 79 72 H
and/or I,(Name of the employer's spouse)	, *NRIC/WP No/FIN:,
assessment record(s) for the current Year of Asse	by *my/our income tax range stated in Part I above, based on *my/ou essment and the two previous Years of Assessment, for the Controlle aptroller of Income Tax to thereafter communicate the results of the
In the event that *my/our assessment record(s) f the point of verification, I*/we understand that the Part I against *my/our assessment record(s) for the	for the current Year of Assessment *is/are not available or finalised a comptroller of Income Tax will verify *my/our income range stated in the two previous Years of Assessment.
Employer	Employer's Spouse
Income Tax Notice of Assessment No:	Income Tax Notice of Assessment No:
I.E	T.S.
Signature:	Signature:
Date:	Date:
*Delete where inapplicable	