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 m	ninute to fill in.			
Please complete this fo	rm only if you do not wish nit (WP) for a foreign domes	to submit your Income î	Tax Notice of Assessment when	
Part I - Monthly Combine	ed Income of Employer and	Spouse		
Please tick (✓) the appro	priate box.			
☐ Below \$2,000	☐ \$2,000 to \$2,499	□ \$2,500 to \$2,999	☐ \$3,000 to \$3,499	
□ \$3,500 to \$3,999	☐ \$4,000 to \$4,999	□ \$5,000 to \$5,999	□ \$6,000 to \$7,999	
□ \$8,000 to \$9,999	☐ \$10,000 to \$12,499	☐ \$12,500 to \$14,999	#\$15,000 to \$19,999	
□ \$20,000 to \$24,999	☐ \$25,000 and above			
Part II – Authorisation by	r Employer and His/Her Spot	ıse		
complete Part II and author	spouse do not wish to submorise the Comptroller of Incomof the verification to the Control	ne Tax to verify your income	Fax Notice of Assessment, please a range stated in Part I above and	
I, <u>Jamunalani</u> (Name of	Man uncthi employer)	, *NRIC/WP No/FIN:	5145 92160	
	employer's spouse)			
assessment record(s) for t	he current Year of Assessmer Iso authorise the Comptroller	nt and the two previous Year	in Part I above, based on *my/our rs of Assessment, for the Controller er communicate the results of the	
the point of verification, 1*/	assessment record(s) for the dive understand that the Complessment record(s) for the two	troller of Income Tax will ve	*is/are not available or finalised at rify *my/our income range stated in ent.	
Employer		Emp	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of A	Income Tax Notice of Assessment No:	
JS .	/	TES .		
Signature:		Signature:	Wall 1	
Date:		Date:	- A	
*Delete where inapplicable	Security Control of the Control of t			