Work Pass Division

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

*Delete where inapplicable



Annex A Employer and Spouse Income Tax Declaration

This form may take you 1 n	minute to fill in.			
	orm only if you do not wish mit (WP) for a foreign domes		ax Notice of Assessment when	
Part I - Monthly Combin	ed Income of Employer and	Spouse		
Please tick (✓) the appro	opriate box.			
☐ Below \$2,000	□ \$2,000 to \$2,499	\$2,500 to \$2,999	□ \$3,000 to \$3,499	
3,500 to \$3,999	34,000 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	3 \$25,000 and above			
Part II – Authorisation b	y Employer and His/Her Spo	use		
complete Part II and auth I,	norise the Comptroller of Incon LIAND remployer)	ne Tax to verify your income, *NRIC/WP No/FIN:	ax Notice of Assessment, please range stated in Part I above and S73 [1282 F	
and/or I,, *NRIC/WP No/FIN:: (Name of the employer's spouse)				
authorise the Comptroller assessment record(s) for of Work Passes. *I/We a verification to the Controlle In the event that *my/our the point of verification, I*	of Income Tax to verify *my/o the current Year of Assessmen also authorise the Comptroller er of Work Passes.	our income tax range stated in the and the two previous Years of Income Tax to thereafte current Year of Assessment troller of Income Tax will ver	in Part I above, based on *my/our s of Assessment, for the Controller or communicate the results of the *is/are not available or finalised at ify *my/our income range stated in	
Employer		Empl	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of A	Income Tax Notice of Assessment No:	
Signature:		Signature:		
Date:		Date:	Date:	