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 for applying for a Work Pern	rm only if you do not wish nit (WP) for a foreign domes	to submit your Income T	ax 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		Δ ψ 13,000 to ψ 13,339	
Part II – Authorisation by	Employer and His/Her Spor	use		
communicate the results o	f the verification to the Control	ne Tax to verify your income ller of Work Passes.	ax Notice of Assessment, please range stated in Part I above and	
I, Lee Fang Yin (Name of employer)		, *NRIC/WP No/FIN:	S8066140A.	
and/or I,(Name of the	employer's spouse)	NRIC/WP No/FIN:		
authorise the Comptroller assessment record(s) for t of Work Passes. *I/We all verification to the Controlle In the event that *my/our athe point of verification 1*/	of Income Tax to verify *my/o he current Year of Assessmer lso authorise the Comptroller or of Work Passes.	our income tax range stated nt and the two previous Year of Income Tax to thereafted current Year of Assessment	in Part I above, based on *my/our s of Assessment, for the Controller er communicate the results of the *is/are not available or finalised at	
Part I against *my/our asse	essment record(s) for the two	previous Years of Assessme	nt.	
Employer		Emp	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of Assessment No:		
TS .		TS .		
Signature: Fylier		Signature:		
Date:		Date:		
*Delete where inapplicable				