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 fo applying for a Work Perr	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	ppriate 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	35,000 to \$5,999	36,000 to \$7,999	
\$8,000 to \$9,999	(a) \$10,000 to \$12,499	\$12,500 to \$14,999	\$15,000 to \$19,999	
\$20,000 to \$24,999	325,000 and above			
Part II – Authorisation by	y Employer and His/Her Spo	use		
I, HVANG M (Name of and/or I, WONG M/N (Name of the authorise the Comptroller assessment record(s) for to of Work Passes. *I/We a verification to the Controlled In the event that *my/our the point of verification, I*/	employer) BAN / IMAX / MILLAN , employer's spouse) of Income Tax to verify *my/o the current Year of Assessment lso authorise the Comptroller er of Work Passes. assessment record(s) for the	"NRIC/WP No/FIN: "NRIC/WP No/FIN: "Dur income tax range stated int and the two previous Years of Income Tax to thereafted current Year of Assessment paroller of Income Tax will ver	in Part I above, based on *my/our so of Assessment, for the Controller or communicate the results of the start of the star	
Employer			Employer's Spouse	
Income Tax Notice of Assessment No:			Income Tax Notice of Assessment No:	
∖ S88Q1399I		S8339031Z		
Signature:		Signature:		
Date:		Date:		
21/02/2019		21/02/2	21/02/2019	

^{*}Delete where inapplicable