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 mi	inute to fill in.			
Please complete this for applying for a Work Perm	m only if you do not wish it (WP) for a foreign domes	to submit your Income Tatic worker.	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			
Part II - Authorisation by	Employer and His/Her Spo	ouse		
complete Part II and auth communicate the results of	spouse do not wish to subrorise the Comptroller of Inco of the verification to the Control employer)	me Tax to verify your income oller of Work Passes.	ax Notice of Assessment, please range stated in Part I above and	
and/or I,		*NRIC/WP No/FIN:	, , , , , , , , , , , , , , , , , , , ,	
(Name of the	e employer's spouse)			
assessment record(s) for	the current Year of Assessme	ent 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, I'	*/we understand that the Con	e current Year of Assessment aptroller of Income Tax will ve o previous Years of Assessm	t *is/are not available or finalised a crify *my/our income range stated in ent.	
Employer			Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of	Income Tax Notice of Assessment No:	
IS IN	1	T. S. C.		
Signature:		Signature:		
Signature:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Date:		Date:		
*Delete where inapplicable			· · · · · · · · · · · · · · · · · · ·	