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	inute to fill in.			
Please complete this for applying for a Work Perm	rm only if you do not wish nit (WP) for a foreign domes	to submit your Income 'tic worker.	Tax Notice of Assessment when	
Part I - Monthly Combine	ed Income of Employer and	Spouse		
Please tick (✓) the appropriate 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	use		
complete Part II and author	spouse do not wish to submorise the Comptroller of Incomof the verification to the Contro	ne Tax to verify your incom	Tax Notice of Assessment, please se range stated in Part I above and	
1, Jan Beng (Name of	employer)	, *NRIC/WP No/FIN:	50056742F-F	
and/or I,(Name of the	employer's spouse)	*NRIC/WP No/FIN:		
authorise the Comptroller assessment record(s) for t	of Income Tax to verify *my/o he current Year of Assessme	our income tax range stated	d in Part I above, based on *my/ou ars of Assessment, for the Controlle ter communicate the results of th	
the point of vernication, 17	assessment record(s) for the five understand that the Compessment record(s) for the two	otroller of Income Tay will ve	t *is/are not available or finalised a erify *my/our income range stated i ent.	
Employer		Emp	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of	Income Tax Notice of Assessment No:	
IS 00567424		T.S	T.S	
Signature:		Signature:		
Turk	A F	75		
Date:		Date:		
0 6 APR 2019				
*Delete where inapplicable				