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	m only if you do not wish lit (WP) for a foreign domes	to submit your Income T	ax Notice of Assessment whe	
	d Income of Employer and			
Please tick (✓) the appro		•		
☐ Below \$2,000	□ \$2,000 to \$2,499	□ \$2,500 to \$2,999	□ #0 000 / * • • • • • • • • • • • • • • • • • • •	
□ \$3,500 to \$3,999	□ \$4,000 to \$4,999		□ \$3,000 to \$3,499	
□ \$8,000 to \$9,999		□ \$5,000 to \$5,999	□ \$6,000 to \$7,999	
□ \$20,000 to \$24,999	\$25,000 and above	□ \$12,500 to \$14,999	□ \$15,000 to \$19,999	
Part II – Authorisation by	Employer and His/Her Spot	use		
If either you and/or your s complete Part II and autho communicate the results of	pouse do not wish to subm rise the Comptroller of Incom the verification to the Control	it a copy of your Income Ta ne Tax to verify your income ler of Work Passes.	ax Notice of Assessment, please range stated in Part I above and	
, (Name of e	mployer)	, *NRIC/WP No/FIN:		
and/or I,(Name of the e	employer's spouse)	NRIC/WP No/FIN:		
authorise the Comptroller o	f Income Tax to verify *my/o e current Year of Assessmen o authorise the Comptrollor	ur income tax range stated in	n Part I above, based on *my/ou of Assessment, for the Controlle communicate the results of the	
n the event that *my/our as he point of verification, I*/w Part I against *my/our asses	ssessment record(s) for the ce understand that the Compt ssment record(s) for the two p	current Year of Assessment * croller of Income Tax will verif previous Years of Assessmen	is/are not available or finalised a y *my/our income range stated in t.	
Employer		Emplo	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of Assessment No:		
		T.35		
Signature:		Signature:		
Date:		Date:		
Delete where inapplicable				