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 Pern	rm only if you do not wish nit (WP) for a foreign domes	to submit your Income Ta tic 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	2 \$3,000 to \$3,499	
			☐ \$6.000 to \$7,999	
□ \$3,500 to \$3,999	□ \$4,000 to \$4,999	☐ \$5,000 to \$5,999	7.5	
□ \$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 auth communicate the results of [Name of	orise the Comptroller of Inconfithe verification to the Contro	ne Tax to verify your income ller of Work Passes. , *NRIC/WP No/FIN:	ax Notice of Assessment, please range stated in Part I above and	
and/or I,	e employer's spouse)	NRIC/WP No/FIN:		
authorise the Comptroller assessment record(s) for	of Income Tax to verify *my/o	our income tax range stated nt and the two previous Year	in Part I above, based on *my/our s of Assessment, for the Controller	
of Work Passes. *I/We a verification to the Controlle	ilso authorise the Comptroller	of Income Tax to thereafte	er communicate the results of the	
the point of verification, I*	assessment record(s) for the /we understand that the Comp essment record(s) for the two	stroller of Income Tax will ver	*is/are not available or finalised at rify *my/our income range stated in ent.	
Employer		Emp	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of A	Income Tax Notice of Assessment No:	
S1213330H	1	580		
Signature:	FN -	Signature:		
Date:		Date:		
*Delete where inapplicable				