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 n	ninute to fill in.		
Please complete this fo applying for a Work Perm	rm only if you do not wish nit (WP) for a foreign domes	n to submit your Income T	ax Notice of Assessment when
	ed income of Employer and		
Please tick (✓) the appro			
☐ Below \$2,000	32,000 to \$2,499	E 20 500 to 20 500	
\$3,500 to \$3,999		□ \$2,500 to \$2,999	□ \$3,000 to \$3,499
	□ \$4,000 to \$4,999	☐ \$5,000 to \$5,999	36,000 to \$7,999
□ \$8,000 to \$9,999	\$10,000 to \$12,499	□ \$12,500 to \$14,999	☐ \$15,000 to \$19,999
320,000 to \$24,999	☐ \$25,000 and above		
Part II – Authorisation by	Employer and His/Her Spo	use	
(Name of the authorise the Comptroller assessment record(s) for the verification to the Controller	employer's spouse) of Income Tax to verify *my/one current Year of Assessment of Work Passes.	NRIC/WP No/FIN:  "NRIC/WP No/F	n Part I above, based on "my/ou of Assessment, for the Controlle r communicate the results of the
me point of ventication. 1"/4	we understand that the Comp ssment record(s) for the two	trailer of income Tay will unri	is/are not available or finalised a fy "my/our income range stated in it.
Employer		Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of Assessment No:	
51465	0624	13	
Signature: Sive	e0	Signature:	
Date:	The Assessment of the Control of the	Date:	
	14 AUG 2019	Net Control of the Co	
"Dolate where inapplicable			