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.		The state of the s
Please complete this fo applying for a Work Pern	rm only if you do not wish nit (WP) for a foreign domes	to submit your Income T	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	T 62 500 to 62 000	F100.000 / 00.400
		□ \$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	y Employer and His/Her Spo	ouse	
(Name of the assessment record(s) for of Work Passes *I/We verification to the Control the point of verification, I	r of Income Tax to verify *my the current Year of Assessment record(s) for the Comptroller of Work Passes.	me Tax to verify your income of the content of Work Passes. *NRIC/WP No/FIN. *NRIC/WP No/FIN. *NRIC/WP No/FIN. *Our income tax range stated ent and the two previous Year of Income Tax to thereafted the current Year of Assessment of Income Tax will year.	I in Part I above, based on *my/our ars of Assessment, for the Controller ter communicate the results of the
Employer		Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of Assessment No:	
7.5		3.3	
Signature:		Signature: Date:	
*Delete where inapplicable	U		