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 mi	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 Ta	ax Notice of Assessment when	
Part I - Monthly Combine	d Income of Employer and	Spouse		
Please tick (✓) the appro				
☐ Below \$2,000	☐ \$2,000 to \$2,499	T \$2 500 to \$2 000		
□ \$3,500 to \$3,999	□ \$4,000 to \$4,999	□ \$2,500 to \$2,999	□ \$3,000 to \$3,499	
□ \$8,000 to \$9,999	-	□ \$5,000 to \$5,999	Ø\$6,000 to \$7,999	
	□ \$10,000 to \$12,499	\$12,500 to \$14,999	9 □ \$15,000 to \$19,999	
□ \$20,000 to \$24,999	☐ \$25,000 and above			
Part II - Authorisation by	Employer and His/Her Spo	use		
If either you and/or your complete Part II and authocommunicate the results of	spouse do not wish to sub- orise the Comptroller of Inco- of the verification to the Control	nit a copy of your Income T me Tax to verify your income oller of Work Passes.	ax Notice of Assessment, please range stated in Part I above and	
1, 2 haguan Kewali (Name of	am Assudant employer)		\$ > 003644C	
and/or I,(Name of the	e employer's spouse)	*NRICWP No/FIN:		
authorise the Comptroller assessment record(s) for of Work Passes. *I/We a verification to the Controll In the event that *mv/our	of Income Tax to verify *my, the current Year of Assessments authorise the Comptrolle er of Work Passes.	our income tax range stated ent and the two previous Year of Income Tax to thereaft	in Part I above, based on *my/ours of Assessment, for the Controlle er communicate the results of the	
Part I against *my/our ass	we understand that the Comsessment record(s) for the two	optroller of Income Tax will ve oprevious Years of Assessme	t "is/are not available or finalised a orify *my/our income range stated i ent.	
Employer		Emp	Employer's Spouse	
Income Tax Notice of A	ssessment No:	Income Tax Notice of Assessment No:		
13		13		
Signature:		Signature:		
1		E		
Date:		Date		
		Date.		
*Delete where inapplicable				