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 r	ninute to fill in.			
Please complete this for applying for a Work Pen	orm only if you do not wish mit (WP) for a foreign domes	to submit your Income T tic worker.	ax Notice of Assessment when	
Part I – Monthly Combin	ed Income of Employer and	Spouse		
Please tick (✓) the appro	ppriate box.			
☐ Below \$2,000	□ \$2,000 to \$2,499	□ \$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	Ø\$10,000 to \$12,499	□ \$12,500 to \$14,999	□ \$15,000 to \$19,999	
□ \$20,000 to \$24,999	☐ \$25,000 and above		Δ Ψ15,000 to Ψ15,555	
Part II – Authorisation by	r Employer and His/Her Spot	ise		
(Name of	employer)	er of Work Passes, *NRIC/WP No/FIN:	range stated in Part I above and	
and/or I,(Name of the	employer's spouse) , *I	NRIC/WP No/FIN:	1	
of Work Passes. *I/We all perification to the Controlle	ne current Year of Assessmen so authorise the Comptroller r of Work Passes.	t and the two previous Years of Income Tax to thereafte	in Part I above, based on *my/our s of Assessment, for the Controller r communicate the results of the *is/are not available or finalised at	
he point of vernication, 177	we understand that the Compt essment record(s) for the two p	roller of Income Tay will yori	fit *mylour income songe stated :-	
Employer		Emplo	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of Assessment No:		
IS ()	177767F	TS		
Signature:		Signature:		
Date:	4.5	Date:		
*	2 4 JUN 2019	\ \		
Delete where inapplicable	7 4 JUN 2013			