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	ninute 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	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	□ \$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	A CALLESCO M. DOCUMENTO DO S. NACOLA DOCUMENTO
\$20,000 to \$24,999	☐ \$25,000 and above		2 4 10,000 10 4 10,000
Part II – Authorisation b	y Employer and His/Her Spo	use	
complete Falt II and aut	spouse do not wish to subnorise the Comptroller of Incorof the verification to the Contro	me lay to verify your income	ax Notice of Assessment, please e range stated in Part I above and
1. Lui Yen Hong (Name of employer)		, *NRICMP NO/FIN: 3 6912796 G	
	le employer's spouse)		
of Work Passes. *I/We verification to the Control In the event that *my/out the point of verification. I	the current year of Assessment also authorise the Comptrolle liler of Work Passes.	ent and the two previous Yea er of Income Tax to thereaft current Year of Assessment	in Part I above, based on *my/ours of Assessment, for the Controlle ter communicate the results of the tris/are not available or finalised a tris/are not available are stated in the tris/are not available or finalised and tris/are not available o
Employer		Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of Assessment No:	
15		TS	
Signature: 1 10 -		Signature:	
To the state of th		K.	
Date:	,	Date:	
*Delete where inapplicable			