Work Pass Division 18 Havelock Road Singapore 059764 Tel: 6438 5122

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## Annex A Employer and Spouse Income Tax Declaration

This form may take you 1 m	ninute to fill in.			
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 tic worker.	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	□ \$15,000 to \$19,999	
□ \$20,000 to \$24,999	☐ \$25,000 and above			
Part II – Authorisation by	Employer and His/Her Spot	ise		
complete Part II and author	spouse do not wish to submorise the Comptroller of Incomf the verification to the Control	ne Tax to verify your income	ax Notice of Assessment, please range stated in Part I above and	
I, Yes Wei Min Shason (Name of employer)		, *NRIC/WP No/FIN:	_, *NRIC/WP No/FIN:_ 9720 8912 Z,	
and/or I,(Name of the	employer's spouse)	NRIC/WP No/FIN:		
assessment record(s) for t	the current Year of Assessmer Iso authorise the Comptroller	it and the two previous Years	in Part I above, based on *my/our s of Assessment, for the Controller er communicate the results of the	
the point of verification, I*/	assessment record(s) for the of we understand that the Compressment record(s) for the two	troller of Income Tax will ver	*is/are not available or finalised at ify *my/our income range stated in nt.	
Employer		Empl	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of A	Income Tax Notice of Assessment No:	
JES N		T.S.		
Signature:		Signature:		
15 S/C	,	T. A.S.		
Date:		Date:		
*Delete where inapplicable				