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 n	ninute to fill in.			
Please complete this fo applying for a Work Perr	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	tiqc.	
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		Δ Ψ 10,000 to Ψ 10,000	
Part II – Authorisation by	Employer and His/Her Spot	use		
complete i art il artu autili	spouse do not wish to submorise the Comptroller of Incomore f the verification to the Control	OR Lay to verity vour income	ax Notice of Assessment, please range stated in Part I above and	
I, (Name of	employer)	, *NRIC/WP No/FIN:		
and/or I,(Name of the	employer's spouse) *	NRIC/WP No/FIN:	,	
authorise the Comptroller assessment record(s) for the	of Income Tax to verify *my/o he current Year of Assessmer so authorise the Comptroller	our income tax range stated i	n Part I above, based on *my/our s of Assessment, for the Controller r communicate the results of the	
the point of verification, I /	assessment record(s) for the owe understand that the Compressment record(s) for the two passment record(s)	troller of Income Tay will wari	tis/are not available or finalised at fy *my/our income range stated in nt.	
Employer		Emplo	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of As	Income Tax Notice of Assessment No:	
T5		T.S.		
Signature:		Signature:		
T.S		<b>1</b>		
Date:		Date:	· · · · · · · · · · · · · · · · · · ·	
*Delete where inapplicable				