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 fo applying for a Work Pern	rm only if you do not wish nit (WP) for a foreign domes	n to submit your Income stic worker.	Tax Notice of Assessment when	
Part I – Monthly Combine	ed Income of Employer and	Spouse		
Please tick (✓) the appro		•		
☐ Below \$2,000	□ \$2,000 to \$2,499	□ \$2 500 to \$2 000	□ #2 000 / #2 100	
□ \$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	√ \$6,000 to \$7,999	
	□ \$10,000 to \$12,499	□ \$12,500 to \$14,999	☐ \$15,000 to \$19,999	
□ \$20,000 to \$24,999	\square \$25,000 and above			
Part II – Authorisation by	Employer and His/Her Spor	use		
complete i dit il dila autilo	spouse do not wish to subm rise the Comptroller of Incon the verification to the Control	ne lax to verity your incom-	Γax Notice of Assessment, please e range stated in Part I above and	
I,LEE Q\XIAN (Name of employer)		*NDIOAND N. /EIN	, *NRIC/WP No/FIN: 58423717E	
		, *NRIC/WP No/FIN:	, NRIC/WP NO/FIN:	
and/or I, ZHONG QIA	ower *	NRIC/WP No/FIN:S	8979424B	
	employer's spouse)	14140/77114	,	
40000001110111100014(5) 101 [[]	o authorise the Comptroller	It and the two previous Voor	in Part I above, based on *pr//our s of Assessment, for the Controller er communicate the results of the	
and point of verification, 17W	ssessment record(s) for the c re understand that the Compt ssment record(s) for the two p	roller of Income Lay will yor	*jś/are not available or finalised at ify *m/y/our income range stated in nt.	
Employer		Empl	Employer's Spouse	
Income Tax Notice of Assessment No:			Income Tax Notice of Assessment No:	
58423717E		S8979424B		
Signature:		Signature:	Signature:	
Date: 29[04[19		Date: 29/04/19		
Delete where inapplicable				