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	inute to fill in.			
Please complete this for applying for a Work Perm	rm only if you do not wish nit (WP) for a foreign domes	to submit your Income Ta 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	Committee of the Commit	
□ \$8,000 to \$9,999	□ \$10,000 to \$12,499	□ \$12,500 to \$14,999		
□ \$20,000 to \$24,999	☐ \$25,000 and above		- , ,	
Part II – Authorisation by Employer and His/Her Spouse				
If either you and/or your spouse do not wish to submit a copy of your Income Tax Notice of Assessment, please complete Part II and authorise the Comptroller of Income Tax to verify your income range stated in Part I above and communicate the results of the verification to the Controller of Work Passes.				
,, *NRIC/WP No/FIN:				
and/or I,, *NRIC/WP No/FIN:, (Name of the employer's spouse)				
authorise the Comptroller assessment record(s) for of Work Passes. *I/We a verification to the Controlled In the event that *my/our the point of verification, I*.	of Income Tax to verify *my/o the current Year of Assessme ilso authorise the Comptrolle er of Work Passes.	our income tax range stated nt and the two previous Year of Income Tax to thereafted current Year of Assessment paraller of Income Tax will year.	in Part I above, based on *my/our s of Assessment, for the Controller er communicate the results of the *is/are not available or finalised at tiff *my/our income range stated in	
Employer		Emp	Employer's Spouse	
Income Tax Notice of Assessment No:			Income Tax Notice of Assessment No:	
K		TE		
Signature:		Signature:	Signature:	
Date:).	Deter	
Date.		Date:		
*Delete where inapplicable				