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			Tax Notice of Assessment when	
Part I - Monthly Combine	ed Income of Employer ar	nd 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 S	pouse		
	orise the Comptroller of Inc	come Tax to verify your income	Fax Notice of Assessment, please e range stated in Part I above and	
I,JASLINDER KAUR HARJIT SINGH		, *NRIC/WP No/FIN:	S8988840I,	
(Name of e				
and/or I, PREMJIT SINGH KOLWANT SINGH (Name of the employer's spouse)		_, *NRIC/WP No/FIN:	S8567223A	
assessment record(s) for the of Work Passes. The all verification to the Controller In the event that *my/our at the point of verification, 1*/	he current Year of Assessn so authorise the Comptro or of Work Passes. assessment record(s) for the we understand that the Co	nent and the two previous Year ller of Income Tax to thereaft ne current Year of Assessment	in Part I above, based on *my/ours of Assessment, for the Controller er communicate the results of the *ic/are not available or finalised a rify *my/our income range stated in ent.	
E	Employer		Employer's Spouse	
Income Tax Notice of Assessment No:			Income Tax Notice of Assessment No:	
G3900973R		G5399526N	G5399526N	
Signature:		Signature:	Signature: premjit	
Date: 10.05.2021		Date: 10.05.2	Date: 10.05.2021	
*Delete where inapplicable				