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 minute to fill in.				
Please complete this form onlapplying for a Work Permit (WF	y if you do not wish o) for a foreign domes	to submit your Income Ta tic worker.	ax Notice of Assessment when	
Part I - Monthly Combined Inco	ome of Employer and	Spouse		
Please tick (✓) the appropriate	box.		401A ~	
☐ 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 Empl	oyer and His/Her Spo	use		
If either you and/or your spouse complete Part II and authorise the communicate the results of the ve	ne Comptroller of Incor erification to the Contro	ne Tax to verify your income ller of Work Passes.	ax Notice of Assessment, please range stated in Part I above and	
I, YAN JING WEN (Name of employer)		,*NRIC/WP No/FIN:	89213978F	
(Name of employ	er)	, NIXIO/VII NO/I IIV	,	
and/or I,(Name of the employ		*NRIC/WP No/FIN:		
(Name of the employ	yer's spouse)			
assessment record(s) for the cur	rent Year of Assessme thorise the Comptrolle	nt and the two previous Year	in Part I above, based on *my/our of Assessment, for the Controller er communicate the results of the	
In the event that *my/our assess the point of verification, I*/we un Part I against *my/our assessme	derstand that the Comp	otroller of Income Tax will ver	*is/are not available or finalised at rify *my/our income range stated in ent.	
Employer		Emp	Employer's Spouse	
Income Tax Notice of Assessment No: \$ 9213978F		Income Tax Notice of A	Income Tax Notice of Assessment No:	
Signature:		Signature:		
Date:		Date:		
*Dolote where inapplicable				