

REQUEST TO REDUCE MONTHLY INSTALMENT/CONTRIBUTION

(This form is only for bankrupts whose cases are under the OA's administration. If your case is administered by a PTIB, please approach your PTIB directly on your request.)

NAME:	
NRIC NO.:	
BANKRUPTCY NO.:	
EMAIL ADDRESS:	
HP NO.:	
CURRENT MONTHLY INSTALMENT/CONTRIBUTION:	\$
PROPOSED MONTHLY INSTALMENT/CONTRIBUTION:	\$
PERIOD TO VARY (NO. OF MONTHS): (UP TILL 31 DECEMBER 2020)	

PLEASE TAKE NOTE OF THE FOLLOWING:

Your request is subject to the document(s) you submit and any change to your monthly instalment/contribution may be communicated to your creditors. Your creditors may raise objections to the reduction and we will inform you should we receive any objections from your creditors. **Please complete this form and submit it via <https://eservices.mlaw.gov.sg/enquiry>.**

You will be informed via email/post of the outcome within 10 days of your request.

TO BE COMPLETED BY REQUESTOR

I understand that this request is subject to the Official Assignee's assessment and that my request **may not be processed** unless I provide documents to evidence that my income has been affected by the current COVID-19 situation.

I am aware that my creditors may raise objections to any change in my monthly instalment/contribution.

INDICATE ACCORDINGLY:

- I have submitted the documents in support of my request.
- I will submit the documents in support of my request within the next 7 days.

(Signature)

Date of Request

(This form should take you less than 10 minutes to complete)