

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 30 JUNE 2021)	
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:	
\Box I have submitted the documents in support of my request.	
\Box I will submit the documents in support of my request within the next 7 days.	
 (Signature)	Date of Request