WORK APPROVAL

PARAMOUNT SERVICES

Generated **12th Dec 2025 12:33**

Claim Number	Insured Name	Workshop Name
250011/31/2026/00036235	SUBHASH	ATHARV AUTOMOBILES

Vehicle Number	**UP53FM8332**	**Registration Date**	
Chassis Number		**Odometer reading**	
Vehicle Manufacturer		**Vehicle Model**	
Insurance Name	**The Oriental Insurance Co. Ltd.**	**HUB Name**	**SVC Ghaziabad**

PARTS ALLOWED

SNO.	PARTS PARTICULAR	REPLACE/REPAIR	LABOUR	PAINTING
1	PIPE STRG HANDLE	REPLACE	0	0
2	BRKT.L HANDLE LEVER	REPLACE	0	0
3	LABOUR		150	0

PARTS DISALLOWED

SNO.	PARTS PARTICULAR

Remarks **In cashless claims, the bill is required in the name of the insurance company. In non-cashless claims, the bill is required in the name of the Customer.**

Note: **** Re-inspection is mandatory along with salvage.**

**** Approval is subject to policy terms & conditions.**

Approved By: **Aditya** **Approver Contact No:** **8858489375**

For PARAMOUNT SERVICES