WORK APPROVAL

PARAMOUNT SERVICES

Generated **30th Dec 2025 15:56**

Claim Number	Insured Name	Workshop Name
250011/31/2026/00036767	SANJAY CHAUHAN	DEEP CHAND TRADERS

Vehicle Number	**UP53FM8675**	**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	FR WHEEL	REPLACE	0	0
2	FR FENDER	REPLACE	0	0
3	FR VISOR	REPLACE	0	0
4	FR WINKER LHS	REPLACE	0	0
5	SIDE MIRROR LHS	REPLACE	0	0
6	SIDE MIRROR RHS	REPLACE	0	0
7	HANDLE PIPE	REPLACE	0	0
8	HANDLE T	REPLACE	0	0
9	LEG GARD	REPLACE	0	0
10	PENAL INNER	REPLACE	0	0
11	RR GREEP	REPLACE	0	0
12	LABOUR		850	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