

गाडी चोरी का केस है

To / सेवा में,
The Oriental Insurance Co Ltd /
दि ओरिएण्टल इश्योरेंस कंपनी लिमिटेड

Subject / विषय : Claim Intimation Letter / दावा सूचना पत्र.

Sir / महोदय,

As per details below, kindly arrange to depute the Spot / Final surveyor. / नीचे दिये गये विवरण के अनुसार, कृपया स्पॉट / फाइनल सर्वेयर नियुक्त करने की व्यवस्था करें :-

| | | |
|-----|--|---|
| 1 | Name of the Insured & Mobile No./ बीमाधारक का नाम & मोबाइल नं. | GANESH MADDESHIYA & 9565267678 |
| 2 | Vehicle No. / वाहन संख्या | UP52BR9963 |
| 3 | Policy No. / पालिसी संख्या | MS/2025/7001/0/46575/444677 |
| 4 | Period of Insurance / बीमा अवधि | 30/05/25 to 29/05/2026 |
| 5 | Date of loss & Time / दुर्घटना का दिनांक & समय | 05/12/2025 & 08:05 PM |
| 6 | Place of Accident / दुर्घटना का स्थान | कंचनपुर |
| 7 | Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं | GANESH MADDESIYA & UP5220130009687 - 9565267678 |
| 8 | Estimated Loss / अनुमानित हानि | 46000/- |
| 09. | Cause of Accident / दुर्घटना का कारण : | कंचनपुर रात के आने के पल वरत आती थी उसी रात ओ मो गाडी रा के सामने से चोरी हो गयी है |
| 10 | Spot Survey / स्पॉट सर्वे / स्पॉट सर्वेयर का नाम | NA |
| 11 | Third Party Loss / तृतीय पक्ष हानि / FIR No. | NA |
| 12 | Name of the Workshop, Address & Contact No./ वर्कशॉप का नाम, पता & मोबाइल / फ़ोन नं. | Ganpati Automobiles Purua Deoria & 7651989597 |

Date / दिनांक : 11/12/25
हस्ताक्षर

गनेश मद्देशिया

गनेश मद्देशिया
Signature of Insured / बीमाधारक के





The Oriental Insurance Company Limited
 (Incorporated in India, subsidiary of General Insurance Corporation of India)
 Regd. Office: Oriental House, P.B. No 7037, A-25/25, Asaf Ali Road, New Delhi- 110 002

MOTOR CLAIM FORM

Div Br Office Address _____

Tel. No _____

Certificate/Policy No MS/2025/7001/0/46575/44467
 Period of Insurance 30/05/2025 to 29/05/2026
 Claim No _____

THE ISSUE OF THIS FORM IS NOT TO BE TAKEN AS AN ADMISSION OF LIABILITY
 Please answer All relevant questions fully

1. INSURED
 (a) Name : GANESH MADDESHIYA
 (b) Address for correspondence : RANCHANPUR
 (c) Telephone : 9565267678

2. THE INSURED VEHICLE

| | | |
|-------------------------------------|---|--|
| Make & Year <u>Hero → : 2022</u> | Engine No. * <u>14067</u> Chassis No. * <u>03778</u> | Registration No. <u>UP52 BR9963</u> |
|-------------------------------------|---|--|

(a) Was the vehicle in proper working condition? YES
 (b) For what purpose was the vehicle being used at the time of accident? Personal Use
 (c) Was trailer attached?
 (d) If a Motor Cycle/scooter
 1. Was a side-car attached? NA
 2. Was a pillion rider carried? NA

II. ADDITIONAL INFORMATION (COMMERCIAL VEHICLE)

The following questions need be answered in commercial vehicles only:

(a) Registered laden weight : _____
 (b) Unladen Weight : _____
 (c) Weight of goods carried/Load Challan No. : _____
 (d) Nature of permit : _____
 (e) Nature of goods carried : _____
 (f) Was the vehicle plying for hire : _____ NA
 (g) If Lorry/Jeep/Tractor, was trailer attached? : _____
 (h) Number of passengers carried : _____
 (i) Number of Passenger permitted : _____



3. DRIVER AT THE TIME OF ACCIDENT

(a) Name : GANESH MADDESTIYA
(b) Age : 13/11/1992
(c) Address : KANCHANPUR
(d) Is the Driver
1. Owner :
2. paid driver? :
3. Owner's relative or friend? :
(e) If paid driver, how long has he been in your employment :
(f) Was he under the influence of intoxication Liquor or drugs? :
(g) Driving Licence Number :
(h) Issuing Authority : NA
(i) Date of Expiry :
(j) Was the licence temporary/permanent :
(k) Details of endorsement/suspension, if any :
(l) Has he been involved in any accident before? :
(m) Has he been charged by the policy? If so, Why? :

4. OTHER INSURANCE

Details of other insurance Policies indemnifying you in respect of this accident

5. DETAILS OF ACCIDENT

(a) Date and Time :
(b) Place :
(c) Speed of vehicle at the time of accident : NA
(d) Give a short description of the accident :
(e) If any third party was responsible for this accident give the name and address :

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage :
(b) Estimated cost of repairs : NA
(c) When and where can the damaged vehicle be inspected :

7. THIRD PARTY INJURY/PROPERTY DAMAGE

(a) Name :
(b) Address :
(c) Full Details of personal injury sustained :
(d) Name and address of any person/hospital giving medical attention to injured person :
(e) Full details of property damaged : NA
(f) Has notice of any claim been given to you? :

8. INJURY TO DRIVER/OCCUPANT

- (a) Was driver/any occupant injured? : _____ / NA
 (b) If yes, give full details : _____

9. WITNESS

- (a) Give names and addresses of passengers/other Witness, if any : _____
 (b) Did a Police Constable take particulars of The accident? : _____
 (c) Was accident reported to Police? If not, Why? : _____ / NA
 (d) If yes, to which Police Station? : _____
 (e) Date and Diary No. : _____

10. THEFT

- (a) Date and Time : 05/12/25 @ 08:05 PM
 (b) Place : KANCHANPUR
 (c) What was stolen? : UNKNOWN
 (d) Estimated cost of replacement? : 46000/-
 (e) By whom discovered and reported? : YES
 (f) Has theft been reported to Police? : YES
 (g) When? : 09/12/2025 13:47 वजे
 (h) Which Policy Station? : TARKULWA
 (i) C.R. diary Number : 026

I/we the above named do hereby, to the best of my/our knowledge and belief, warrant the truth of the foregoing statement every respect and I/We have made or in any further declaration the Company may require in respect of the said accident, shall make any false or fraudulent statement of any suppression or concealment, the Policy shall be void and all rights to receive thereunder in respect of part or future accident shall be forfeited.

Date 11/12/25 200

Signature of the insured गनेरा महे शिवा

Discharge Voucher

ACCIDENT DEPARTMENT

Claim No. _____

Issuing Office



The Oriental Insurance Company Limited
Head Office, A-25/27, Asaf Ali Road, New Delhi-110 002

Received _____ Day of _____ 200____
From THE ORIENTAL INSURANCE COMPANY LIMITED, the sum of Rs. _____
(In words Rupees _____)
in full and final settlement of the loss and/or damage caused through the accident to
my/our motor Car/Vehicle No. _____ insured under Policy No. _____ of
the said company and accident which occurred on or about _____ I/We give
the discharge receipt to the Company in full and final settlement of all my/our claims
present of future arising directly/indirectly in respect of the said accident.

Rs. _____

One Rupee
Revenue Stamp
When Amount
Exceeds Rs. 5000/-

Witness
Name
Signature
Address

Signature *गजरा गे सि 41*
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank

CERTIFICATE OF REGISTRATION

Registration No : UP52BR0963 Registration Date : 03-Oct-2022
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : GANPATI AUTOMOBILES (D), PURWA CHAURAHA GKP ROAD, DEORIA, . . .
 Owner Name : GANESH MADDESHIYA Son/wife/daughter of : VINOD MADDESHIYA
 Full Address: (Permanent) : VILL+PO-KANCHANPUR, PS-TARKULWA, DEORIA-UTTAR PRADESH-274408
 Full Address: (Temporary) : VILL+PO-KANCHANPUR, PS-TARKULWA, DEORIA-UTTAR PRADESH-274408
 Fitness Up To : 02-Oct-2037 Owner Serial No : 1

Detailed Description

Class of Vehicle : M-CYCLE/SCOOTER Link Vehicle No :
 Ownership : INDIVIDUAL Norms : BHARAT STAGE VI
 Maker's Name : HERO MOTOCORP LTD
 Front HSRP No : AA1021653811 Rear HSRP No : AA2060518962
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 06/2022
 No of Cylinders : 1 Chassis No : MBLHAW146NGF03778
 Engine No : HA11ESNGF14067 Fuel : PETROL
 Horse Power(BHP) : 7.91 Cubic Capacity : 97.20
 Maker's Classification : HFDELUXE(SLF-DR-CST)SS Wheel base : 1235
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleeper Cap : 0 Unladen Wt (kgs) : 112
 Colour : Grey Black Laden/GV Wt (kgs) : 242
 Other Criteria : AC Fitted : NO
 Vehicle Purchase As : Fully Built

Additional Particulars of all transport vehicles other than motor cabs (Gross Vehicle Weight)

| By Manuf. | Description | As Regd. | Weight(in kgs) |
|-----------|-------------|----------|----------------|
|-----------|-------------|----------|----------------|

- a) Front:
 b) Rear:
 c) Other:
 d) Tandem:

The motor vehicle above described is subject to Hypothecation in favour of w.e.f. . .

| | | | |
|------------------------|-------------|---------------------|-------------------------|
| Purchase dt | 29-Sep-2022 | Sale Amt | 64303/- |
| OTT Date | 29-Sep-2022 | Amount/Rcpt No | 6431 / UP52D22100000344 |
| Vehicle is Govt./ Pvt. | PRIVATE | Tax Exempted or Not | NOT EXEMPTED |
| Date of Approval | 06-Oct-2022 | | |

Other State/Transfer/Conversion Details

| | |
|----------------|-----------------|
| Previous Owner | Previous RegNo |
| Old State | Entry Date |
| Transfer Date | Conversion Date |

This certificate is valid from 03-Oct-2022 to 02-Oct-2037

Date : 15-Nov-2022 15:39:53

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority
 Date : 15-Nov-2022



0067601



Package Offer

2025-05-30

Mr./Ms. GANESH MADDESHIYA

VILL+PO - KANCHANPUR, P.S - TARKULWA, Deoria, 274408

, Uttar Pradesh, 274408

Dear Mr./Ms. GANESH MADDESHIYA,

It is indeed our pleasure to bring you on-board. We value your support and contribution to our business, and we trust that your experience with our business will bring you the utmost satisfaction.

We shall be assisting you with all the necessary contact details and resources needed to effectively communicate with our business. Your offer details of the program are attached, please feel free to contact us if you have any comments or queries.

We are committed to delivering responsive and excellent service to all our customers. We are pleased to serve you with the highest quality Services. Our customer's satisfaction is the most important part of our business, and we work hard to ensure our customers feel valued and heard. With the help of our award-winning customer service team, we will ensure you receive real-time solutions and quality products every time.

In case you have to initiate a claim, please contact us at phone no: +91 7941050643 or email: info@motorsathi.com or visit our website at www.motorsathi.org or download Motorsathi app from play store for guidance from Motorsathi.

Mr./Ms. GANESH MADDESHIYA, thank you for again for choosing to do business with us. We are grateful for the opportunity to assist you and will work tirelessly to provide our services to you.

We can be reached everyday during 9AM to 7PM at:

Phone No: +91 7941050643

Email: info@motorsathi.com

Website: www.motorsathi.org



Please scan the QR for details.

M. Madhavi



Package Contract No.: MS/2025/7001/O/46575/444677

Motorsathi Care Private Limited
 B.Dass Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India
 Contact us at:
 Phone: +91 79410 50643
 Email: info@motorsathi.com
 Visit the help section of www.motorsathi.com

| Name of Certificate Holder | Date of Birth | Mobile No. | Father/Husband Name | Make | Model | |
|--|------------------|----------------------------------|---|---------------------|-----------------------------|--------------|
| GANESH MADDESHIYA | 1992-01-01 | 8874712628 | S.O VINOD MADDESHIYA | Hero Motocorp | HF DELUXE | |
| Sub Model | Vehicle Regn. No | Engine No. | Chassis No. | Year of Mfg | Cubic Capacity | Vehicle Type |
| STEE 120 CAST | UP52BR-9963 | h411esig14067 | mblh4w146ng03778 | 2022 | 100 | TW |
| Asset Declared Value (ADV) | Side Car ADV | Non-Electrical Accessories ADV | Electrical Accessories ADV | CNG/LPG/Bi-Fuel ADV | Total ADV | |
| 46000.00 | NA | 0.00 | 0.00 | 0.00 | 46000.00 | |
| Place of Regn. | Body Type | HP/Lease/Hire-Purchase Agreement | Branch Office of HP/Lease/Hire-Purchase | Seating Capacity | Offered Payment (incl. GST) | |
| | Solo | | | 2 | 1271.38 | |
| Address | | | City / District | Pin Code | State | |
| VILL - PO - KANCHANPUR, P.S - TARKULWA, Deoria, 274408 | | | | 274408 | Uttar Pradesh | |
| Nominee Name | Nominee Gender | Nominee Age | Nominee Relation | Package Start Date | Package End Date | |
| MAHESH MADDESHIYA | Male | 26 Years | BROTHER | 2025-05-30 12:32 | Midnight of 2026-05-29 | |

Section A, VRC: 601.99 ICR: 125.68 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST(A): 987.67
 Section B, EC: 0.00 EC Service: 0.00 ECPD: 0.00 Sub Total: 0.00 TAC: 0.00 ENC: 0.00 EDC: 0.00 MCPD: 0.00 Total(B): 0.00 GST (CGST @9% + SGST @9%): 0.00 Total with GST(B): 0.00
 Section C, MS Services(O): 0.00 MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @9% + SGST @9%): 0.00 Total MS Services with GST(C): 0.00
 Section D, Drive Assure: 240.43 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 43.28 Total with GST(D): 283.71
Total Section A+B+C+D Offered Price After Discount: 1271

| Package Period Covered | 2025-05-30 To 2026-05-29 | 2026-05-30 To 2027-05-29 | 2027-05-30 To 2028-05-29 | 2028-05-30 To 2029-05-29 | 2029-05-30 To 2030-05-29 |
|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| ADV | 46000 | NIL | NIL | NIL | NIL |
| MS Services Period Covered (NODL) | 1 Year | NIL | NIL | NIL | NIL |

* THE VEHICLE COVERED IN THIS CONTRACT HAVE A VALID TP COVERAGE TAKEN FROM AN INSURANCE COMPANY VALID UPTO 2027-09-28 (DETAILS ARE AS PROVIDED BY THE CUSTOMER)

LIMITATIONS AS TO USE: This package covers use of the vehicle for any purpose other than: a) Hire or Reward b) Carriage of goods (other than samples or personal luggage) c) Organized Racing d) Pace Making e) Speed Testing f) Reliability Trials g) Any purpose in connection with Motor Trade

DRIVER: Any person including covered individual: Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from Holding or obtaining such a license. Provided also that the person holding an effective Learners License may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989

LIMIT OF ACCOUNTABILITY: Limit of the amount of the Company's accountability in respect of any one request or series of requests arising out of one event. Up to Rs - 100000. Note: The amount mentioned is estimated breakup. Actual Costs and Terms & Conditions are in package document which can be downloaded only via authorized portal www.motorsathi.com or MotorSathi App

DISCLAIMER: The package stands cancelled or void in the event of Cheque Dishonored. The company may cancel the package by sending 7 days' notice in case of fraud, misrepresentation, nondisclosure of material fact or non-co-operation of the coverage.

ANTI MONEY LAUNDERING CLAUSE: In the event of a request under the package exceeding Rs 1lakh or a request for refund of payment exceeding Rs 1 lakh, the accountability will comply with the provisions of AML package of the company. The AML package is available in all our operating offices as well as Company website.

TO REGISTER REQUEST PLEASE CONNECT WITH MOTORSATHI CARE PVT LTD AT: Website: www.motorsathi.com Customer Care / Toll Free Phone No: 7941050643 email id: info@motorsathi.com



IMPORTANT NOTICE: The coverage is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment made by the company by reason of wider terms appearing in the Certificate. All disputes arising out of or in connection with this agreement shall be subject to the exclusive jurisdiction of the courts at Aligarh.

Received with Thanks Rs 1271.38 ON 2025-05-30 from Mr./Ms. GANESH MADDESHIYA against the ARN No. INC00444677
 This acknowledgement is subject to a compulsory excess of Rs. 100/- & Depreciation is applicable as per terms & conditions*
 (Please turn overleaf for details) Consolidated Stamp Duty Paid Endorsements: IMT - 22, 16, 18
 Customer Service Address: B.Dass Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001), India



भारत सरकार
Government of India



Aadhaar no. issued: 1312/2014



गणेश मद्धेशिया
Ganesh Maddhesia
जन्म तिथि/DOB: 20/06/1996
पुरुष/ MALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सर्वोपलब्ध (ऑनलाइन या ऑफलाइन) या कृत्रिम बुद्धि
आधारित एप्लिकेशन की स्वीकृति के साथ किया जाना चाहिए।

Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML)

5771 1203 7483

मेरा आधार, मेरी पहचान



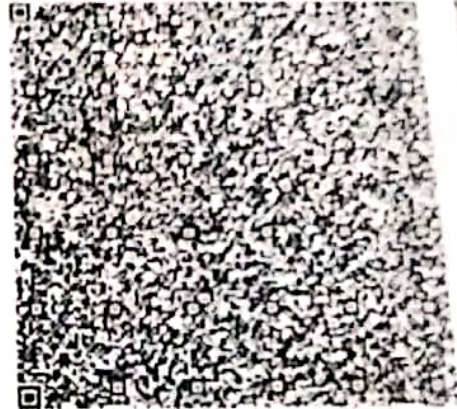
कार्यकारी विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



Details as on: 01/09/2025

पता:
द्वारा: विनोद मद्धेशिया, कंचनपुर, कंचनपुर, देवरिया,
उत्तर प्रदेश - 274408

Address:
C/O: Vinod Maddhesia, Kanchanpur, PO:
Kanchanpur, DIST: Deoria,
Uttar Pradesh - 274408



5771 1203 7483

VID : 9109 5367 0865 8080

1947

help@uidai.gov.in

www.uidai.gov.in



आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

HMPPM3208C



नाम / Name

GANESH MADDHESIA

पिता का नाम / Father's Name

VINOD MADDHESIA

जन्म की तारीख /

Date of Birth


20/06/1996

जनेश मद्धेशिया


हस्ताक्षर / Signature

13092025



UNION OF INDIA Driving Licence 

NP 52 20130009687



नाम / Name: **GANESH MADDESIA**
 पति/पत्नी या माता / Son/Daughter/Wife of: **MINOD MADDESIA**

मार्गदर्शक / Date of Issue: **11/07/2013**
 जन्म तिथि / Date of Birth: **13/11/1992**

रक्त समूह / Blood Group: **Unknown**


20130009687

UP 0028921317

नाम / Address: **...**

Holder's Signature

नाम / Issuing Authority Sign



Form 7 Rule 16(2)

FIRST INFORMATION REPORT
(Under Section 173 B.N.S.S)
प्रथम सूचना रिपोर्ट
(धारा 173 बी एन एस एस के तहत)

1. District/Unit (जिला/इकाई): देवरिया
P.S. (थाना): तरकुलवा Year (वर्ष): 2025
FIR No.(प्र.सू.रि. सं.): 0410
Date & Time of FIR(प्र.सू.रि. की दिनांक/समय): 09/12/2025 13:47

| 2. S.No. (क्र.सं.) | Acts (अधिनियम) | Sections (धारा(एँ)) |
|-----------------------|--------------------------------------|---------------------|
| 1 | भारतीय न्याय संहिता (बी एन एस), 2023 | 303(2) |

3.(a) Occurrence of offence (अपराध की घटना) :

1. Day शुक्रवार Date From 05/12/2025 Date To 05/12/2025
(दिन): (दिनांक से): (दिनांक तक):
Time Period पहर 7 Time From 20:05 बजे Time To 20:05
(समय अवधि): (समय से): (समय तक): बजे

(b) Information received at P.S. (थाना जहां सूचना प्राप्त हुई):

Date 09/12/2025 Time (समय): 13:47 बजे
(दिनांक):

(c) General Diary Reference (रोजनामचा संदर्भ):

Entry No. 026 Date & Time 09/12/2025 13:47 बजे
(प्रविष्टि सं.): (दिनांक और समय):

4. Type of Information (सूचना का प्रकार): लिखित

5. Place of Occurrence (घटनास्थल):

Direction and distance from P.S. दक्षिण, 03 Beat No.
1. (a) (थाना से दूरी और दिशा): किमी (बीट सं.):
(b) Address वादी का घर कंचनपुर
(पता):

(c) In case, outside the limit of this Police Station, then
(यदि थाना सीमा के बाहर है तो):

Name of P.S. District(State)
(थाना का नाम): (ज़िला (राज्य)):

6. Complainant / Informant (शिकायतकर्ता/सूचनाकर्ता):

(a) Name (नाम): श्री गनेश मदेशिया

(b) Father's Name (पिता का नाम): विनोद मदेशिया

(c) Date/Year of Birth (जन्म तिथि / वर्ष): 2000

(d) Nationality (राष्ट्रीयता): भारत

(e) UID No. (यूआईडी सं.):

(f) Passport No. (पासपोर्ट सं.):

Date of Issue (जारी करने की तिथि):

Place of Issue (जारी करने का स्थान):

(g) Id details (Ration Card, Voter ID Card, Passport, UID No., Driving License, PAN)

| S.No.(क्र.सं.) | Id Type (पहचान पत्र का प्रकार) | Id Number (पहचान संख्या) |
|----------------|--------------------------------|--------------------------|
| 1 | | |

(h) Address (पता):

| S.No. (क्र.सं.) | Address Type (पता का प्रकार) | Address (पता) |
|--------------------|---------------------------------|---|
| 1 | वर्तमान पता | कंचनपुर, तरकुलवा, देवरिया, उत्तर प्रदेश, भारत |
| 2 | स्थायी पता | कंचनपुर, तरकुलवा, देवरिया, उत्तर प्रदेश, भारत |

(i) Occupation (व्यवसाय):

(j) Phone number (दूरभाष सं.):

Mobile (मोबाइल सं.): 91-9565267678

7. Details of known/suspected/unknown accused with full particulars

(जात / संदिग्ध / अज्ञात अभियुक्त का पूरे विवरण सहित वर्णन):

Accused More Than (अज्ञात आरोपी एक से अधिक हों तो संख्या):

| S.No. (क्र.सं.) | Name (नाम) | Alias (उपनाम) | Relative's Name (रिश्तेदार का नाम) | Present Address (वर्तमान पता) |
|-----------------|------------|---------------|------------------------------------|---|
| 1 | अज्ञात | | पिता का नाम : अज्ञात | 1. अज्ञात, तरकुलवा, देवरिया, उत्तर प्रदेश, भारत |

8. Reasons for delay in reporting by the complainant/informant

(शिकायतकर्ता / सूचनाकर्ता द्वारा रिपोर्ट देरी से दर्ज कराने के कारण):

9. Particulars of properties of interest (संबन्धित सम्पत्ति का विवरण):

| S.No. (क्र.सं.) | Property Category (संपत्ति श्रेणी) | Property Type (सम्पत्ति का प्रकार) | Description (विवरण) | Value (In Rs/-) (मूल्य (रु में)) |
|-----------------|------------------------------------|------------------------------------|---------------------|----------------------------------|
|-----------------|------------------------------------|------------------------------------|---------------------|----------------------------------|

10. Total value of property (In Rs/-)-सम्पत्ति का कुल मूल्य(रु)

11. Inquest Report / U.D. case No., if any (मृत्यु समीक्षा रिपोर्ट / यू.डी. प्रकरण सं., यदि कोई हो):

S.No. UIDB Number

12. First Information contents (प्रथम सूचना तथ्य):

नकल तहरीरसेवा में श्री मान थानाध्यक्ष महोदय तरकुलवा देवरिया (उ०प्र०) महोदय निवेदन है कि हम प्रार्थी गनेश मद्देशिया पुत्र विनोद मद्देशिया सा.पो. कंचनपुर थाना तरकुलवा जिला देवरिया के स्थाई निवासी हूँ दिनांक 05.12.2025 को समय लगभग रात 08 वजे कर 5 मिनट पर मेरे दरवाजे पर से मोटर साइकिल HF डिल्कस जिसका नं०- UP52BR9963 से चोरी हो गयी रात में मेरे दरवाजे के सामन एक बारात भी आयी थी हम लोगो ने खोजवीन किया लेकिन अभी तक मेरी मोटरसाइकिल नहीं मिली है अतः श्रीमान जी से निवेदन है कि आफ हमारी प्राथमिकी दर्ज कर उचित कानूनी कार्यवाही करने की कृपा करें आपकी महान टया होगी प्रार्थी हस्ता० हिन्दी पठनीय गनेश मद्देशिया सा.पो. कंचनपुर थाना तरकुलवा जिला देवरिया Mo- 9565267678 ता. 9-12-2025 , HM/CM अभियोग पंजीकृत करें। ह०अंग्रेजी अपठनीय थानाध्यक्ष मृत्युन्जय राय दिनांक 09.12.025 , कायमी लेखक- हे०मु०अ० कपिल वर्मा

13. Action taken: Since the above information reveals commission of offence(s) u/s as mentioned at Item No. 2.

(की गयी कार्यवाही : चूंकि उपरोक्त जानकारी से पता चलता है कि अपराध करने का तरीका मूद सं. 2 में उल्लेख धारा के तहत है।)

(1) **Registered the case and took up the investigation:** (प्रकरण दर्ज किया गया और जांच के लिए लिया गया) or
(या)

(2) **Directed (Name of I.O.)** Shubham Kumar **Rank** SI (Sub-Inspector)
(जांच अधिकारी का नाम): Singh **(पद):**

No. **to take up the Investigation**
(सं.): (को जांच अपने पास में लेने के लिए निर्देश दिया गया) **or** (या)

(3) **Refused investigation due to** (जांच के लिए):

or (के कारण इंकार किया या)

(4) **Transferred to P.S.** **District**
(थाना): (ज़िला):
on point of jurisdiction (को क्षेत्राधिकार के कारण हस्तांतरित) .

F.I.R. read over to the complainant / informant, admitted to be correctly recorded and a copy given to the complainant / informant free of cost.
(शिकायतकर्ता / सूचनाकर्ता को प्राथमिकी पढ़ कर सुनाई गयी, सही दर्ज हुई माना और एक कॉपी निशुल्क शिकायतकर्ता को दी गयी।)

R.O.A.C.(आर. ओ .ए .सी.)

N.C.R.B (एन.सी.आर.बी)
I.I.F.-I (एकीकृत जाँच फार्म -I)

14 Signature/Thumb impression of the
complainant / informant.(शिकायतकर्ता /
सूचनाकर्ता के हस्ताक्षर / अंगूठे का निशान):

15 Date and time of dispatch to the court
(अदालत में प्रेषण की दिनांक और समय):

Signature of Officer in charge,
Police Station
(थाना प्रभारी के हस्ताक्षर)

Name SHO PS TARKULWA

Rank I (Inspector)

No. 9454403233

