

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

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.	मनीज कुमार 9839195531
2	Vehicle No. / वाहन संख्या	UP31 BT 2364
3	Policy No. / पालिसी संख्या	
4	Period of Insurance / बीमा अवधि	2
5	Date of loss & Time / दुर्घटना का दिनांक & समय	26/11/2025 4:00 PM.
6	Place of Accident / दुर्घटना का स्थान	रामापुर के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	मनीज कुमार मोर्य 9839195531 UP31 20050008986
8	Estimated Loss / अनुमानित हानि	
09.	Cause of Accident / दुर्घटना का कारण : रामापुर के पास सामने से मोटर साइकिल वाले से टक्कर हो गई तभी आ रहे मोटर साइकिल वाले ने पीछे से टक्कर मार दी जिससे मेरी गाड़ी बंधी ओर गिरकर सतिमस्त हो गई।	
10	Spot Survey / स्पॉट सर्वे / स्पॉट सर्वेयर का नाम	N/A
11	Third Party Loss / तृतीय पक्ष हानि / FIR No.	N/A
12	Name of the Workshop, Address & Contact No./ वर्कशॉप का नाम, पता & मोबाइल / फ़ोन नं.	MASKRAM AUTO SALES, LRP ROAD, LAKHIMPUR-KHERI, 9151154036.

Date / दिनांक : 28/11/2025
हस्ताक्षर

मनीज कुमार
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 MEERUT Certificate/Policy No. _____
 Tel. No. _____ Period of Insurance _____
 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 : Manoj Kumar
 (b) Address for correspondence : VILL: ZAGSAR PO-SARSAGWA, PS-RHERI, UP-262701
 (c) Telephone : 9839195531

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2020</u>	Engine No. <u>HAIJPLG1A00421</u> Chassis No. <u>MBLHAN068LG1A30384</u>	Registration No. <u>UP31BJ</u> <u>9364</u>
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(a) Was the vehicle in proper working condition? Yes
 (b) For what purpose was the vehicle being used at the time of accident? _____
 (c) Was trailer attached? _____
 (d) If a Motor Cycle/scooter
 1. Was a side-car attached _____
 2. Was a pillion rider carried _____ N/A

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 : _____
 (g) If Lorry/Jeep/Tractor, was trailer attached? : _____ N/A
 (h) Number of passengers carried : _____
 (i) Number of Passenger permitted : _____

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : MATNOT KUMAR MAURYA
 (b) Age : 45-07-1985
 (c) Address : VII-JASGARH PS- SARSAWAN/THANA-
LAKHIMPUR-KHERI 262123
 (d) Is the Driver
 1. Owner : Yes
 2. paid driver? : No
 3. Owner's relative or friend? : No
 (e) If paid driver, how long has he been in your employment : No
 (f) Was he under the influence of intoxication Liquor or drugs? : No
 (g) Driving Licence Number : UP3120050008986
 (h) Issuing Authority : 19-09-2025
 (i) Date of Expiry : 04-09-2035
 (j) Was the licence temporary/permanent : Permanent
 (k) Details of endorsement/suspension, if any : No
 (l) Has he been involved in any accident before?: No
 (m) Has he been charged by the policy? If so, Why?: No

4. OTHER INSURANCE

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

5. DETAILS OF ACCIDENT

- (a) Date and Time : 26/11/2025 4:00PM
 (b) Place : रामपुर के पास
 (c) Speed of vehicle at the time of accident : 30-40
 (d) Give a short description of the accident : रामपुर के पास सामने से मोटरसाइकिल वाले से
 (e) If any third party was responsible for this accident give the name and address : लचकर ही जब तभी पीछे आ रहे मोटर साइकिल वाले ने पीछे से लचकर मार पी किससे मरो गाड़ी वाणी अर

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : FRONT AND BACK AND LEFT
 (b) Estimated cost of repairs :
 (c) When and where can the damaged vehicle be inspected : MOSARAM AUTO SPARES, 2 RP ROAD
LAKHIMPUR-KHERI

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 : N/A
 (e) Full details of property damaged :
 (f) Has notice of any claim been given to you? :

8. INJURY TO DRIVER/OCCUPANT

- (a) Was driver/any occupant injured? : NO
- (b) If yes, give full details : NO

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? : N/A
- (d) If yes, to which Police Station? : _____
- (e) Date and Diary No. : _____

10. THEFT

- (a) Date and Time : _____
- (b) Place : _____
- (c) What was stolen? : _____
- (d) Estimated cost of replacement? : _____
- (e) By whom discovered and reported? : _____
- (f) Has theft been reported to Police? : N/A
- (g) When? : _____
- (h) Which Police Station? : _____
- (i) C.R. diary Number : _____

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 28/11/2005

Signature of the insured शशिकांत कुमारे

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. UP 31BJ 9364 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
Occupation
Address

Bank Account Number
Name of the Bank



FORM 23
CERTIFICATE OF REGISTRATION



Registration No : UP31BJ9364 Registration Date : 06-Feb-2020
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : MUSA RAM AUTO SALES, L R P ROAD, LAKHIMPUR KHERI, ...
 Owner Name : MANOJ KUMAR Son/wife/daughter of : SRI RANGI LAL
 Full Address: (Permanent) : VILL- ZAGSAR PO- SARSAWA, VILL- ZAGSAR PO- SARSAWA, PS- KH ERI, KHERI, UTTAR
 PRADESH-262701
 Full Address: (Temporary) : VILL- ZAGSAR PO- SARSAWA, VILL- ZAGSAR PO- SARSAWA, PS- KH ERI, KHERI-UTTAR
 PRADESH-262701

Fitness UpTo : 05-Feb-2035 Tax UpTo : One Time
 Owner Serial No : 1

Detailed Description

Class of Vehicle : M-CYCLE/SCOOTER Link Vehicle No :
 Ownership : INDIVIDUAL Norms : BHARAT STAGE IV
 Maker's Name : HERO MOTOCORP LTD
 Front HSRP No : AA2010266333 Rear HSRP No : AA1007249890
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 01/2020
 No of Cylinders : 1 Chassis No : MBLHAW068LGA30384
 Engine No : HA11EPLGA00421 Fuel : PETROL
 Horse Power(BHP) : 8.24 Cubic Capacity : 97.20
 Maker's Classification : HF DELUXE (SELF-DRUM-CA Wheel base : 1235
 ST)
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleeper Cap : 0 Unladen Wt (kgs) : 109
 Colour : BLACK Laden/GV Wt (kgs) : 239
 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 : 31-Jan-2020 Sale Amt : 49300/-
 OTT Date : 31-Jan-2020 Amount/Rcpt No : 4930 / UP31D20020000170
 TaxUpTo : One Time Vehicle is Govt./ Pvt. : PRIVATE
 Tax Exempted or Not : NOT EXEMPTED Date of Approval : 06-Feb-2020

Other State/Transfer/Conversion Details

Previous Owner : Previous RegNo :
 Old State : Entry Date :
 Transfer Date : Conversion Date :

This certificate is valid from 06-Feb-2020 to 05-Feb-2035

Date : 16-Mar-2020 17:23:06

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority
 Date : 16-Mar-2020

K 1245200

UPDL311000024373

UP31 20050008986

Invalid Carriage (Regn Numbers)*

Hazardous Validity* Hill Validity*

Class of Vehicle	Code	Issued By	Date of Issue	Vehicle Category	Badge Number*	Badge Issued Date*	Badge Issued By*
MCWG		UP31	05-09-2005	NT			
LMV		UP31	05-09-2005	NT			
MVSD							

Emergency Contact Number

Licensing Authority
 UP31 LAKHIMPUR KHERI

Form 7 Rule 16(2)

Indian Union Driving Licence
Issued by Uttar Pradesh

UP31 20050008986

Issue Date: 19-09-2025 Validity (NT): 04-09-2035 Validity (ET):

Holder's Signature

Name: **MANOJ KUMAR MAURYA**

Date of Birth: 15-07-1985 Blood Group: Organ Donor: **N**

Son/Daughter/Wife of: **RANGILAL MAURYA**

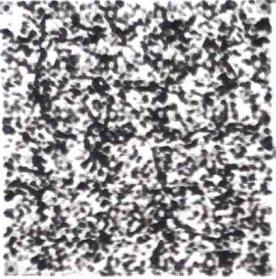
Address:
 VILL JASGARH POST SARSAWAN THANA
 LAKHIMPUR KHERI LAKHIMPUR, LAKHIMPUR
 KHERI 262728

Date of First Issue: 05.09.2005

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
आशुतोष रानी लाल, 279, जगसड़, जगसड़, खैरी,
उत्तर प्रदेश - 262728


Address:
S/O: Rangi Lal, 279, Zagsar, Zagsar, Kheri,
Uttar Pradesh - 262728



5419 4598 1956
VID : 9132 0555 7949 1691

1947 | help@uidai.gov.in | www.uidai.gov.in

भारत सरकार
Government of India



मनोज कुमार
Manoj Kumar
जन्म तिथि/DOB: 15/07/1985
पल्लव/ MALE

5419 4598 1956
VID : 9132 0555 7949 1691

मेरा आधार, मेरी पहचान

मनोज कुमार

9839195531

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

FCEPK2839G

नाम / Name
MANOJ KUMAR

पिता का नाम / Father's Name
RANGI LAL

जन्म की तारीख / Date of Birth
15/07/1985

मनोज कुमार
हस्ताक्षर / Signature



25032017

मनोज कुमार

MOSARAM AUTO SALES

L.R.P.ROAD, LAKHIMPUR KHERI, LAKHIMPUR, KHERI, 262701, UP, INDIA
 State Code: 9 Contact: 7800009643, 7408404715, 7408404714, 7800009644
 GSTIN No: 09AAJFM3951B1ZD
 Authorized Dealer: Hero MotoCorp Ltd.

MOSARAM AUTO SALES

ESTIMATE

Estimate No.	10730-03-REST-1225-631	Date	03-12-2025
Customer Name	MANOJ KUMAR,,,, ,,,,,	Contact No.	9839195531
VIN	MBLHAW068LGA30384	Model	HF DELUXE
Insurance Company		Reg No.	UP31BJ9364
HMCGL Card No	1073022840008040	HMCGL Card Category	Diamond

S No	Part Number	HSN No.	Billing Type	Rate	Qty	SGST %	CGST %	UTGST %	IGST %	% Discount	Discount %	Net Amount
1	83400KSTH50ZDS -FR VISOR(CBR)	87141090	Paid	937.29	1	9.00	9.00	0.00	0.00	0.00	0.00	1,106.00
2	61000AAHF00RS -FENDER FRONT NH-1	87141090	Paid	687.29	1	9.00	9.00	0.00	0.00	0.00	0.00	811.00
3	3310BAAHH51S -LIGHT ASSY. HEAD	85122010	Paid	459.68	1	9.00	9.00	0.00	0.00	0.00	0.00	542.42
4	61311KST950S -STAY HEAD LIGHT BRACKET	87141090	Paid	233.90	1	9.00	9.00	0.00	0.00	0.00	0.00	276.00
5	33450KST940S -WINKER ASSY.L FR(W/O BULB)	85122010	Paid	139.83	1	9.00	9.00	0.00	0.00	0.00	0.00	165.00
6	53100AAH810S -PIPE STRG. HANDLE	87141090	Paid	366.95	1	9.00	9.00	0.00	0.00	0.00	0.00	433.00
7	53200KST950S -STEM COMP.STRG.	87141090	Paid	679.66	1	9.00	9.00	0.00	0.00	0.00	0.00	802.00
8	51410KTC901S -PIPE COMP.FR.FORK	87141090	Paid	859.32	2	9.00	9.00	0.00	0.00	0.00	0.00	2,028.00
9	53175AAFH00S -LEVER COMP.R STRG.HNDL.	87141090	Paid	77.97	1	9.00	9.00	0.00	0.00	0.00	0.00	92.00
10	88110AAH2000S -MIRROR ASSEMBLY RIGHT BACK(GY-141M)	70091090	Paid	203.39	1	9.00	9.00	0.00	0.00	0.00	0.00	240.00
11	50803KST940S -GUARD LEG	87141090	Paid	527.12	1	9.00	9.00	0.00	0.00	0.00	0.00	622.00
12	17520ACK000RS -"FUEL TANK(BLACK (TYPE-1),NH-1 (T1))"	87141090	Paid	6,250.00	1	9.00	9.00	0.00	0.00	0.00	0.00	7,375.00
13	K50506KCCA900RS -KIT STEP	87141090	Paid	190.68	1	9.00	9.00	0.00	0.00	0.00	0.00	225.00
14	77210AAH100RS -RIGHT REAR COWL (BLACK NH-1 (TYPE-1))	87141090	Paid	405.93	1	9.00	9.00	0.00	0.00	0.00	0.00	479.00
15	77220AAH100RS -LEFT REAR COWL (BLACK NH-1 (TYPE-1))	87141090	Paid	405.93	1	9.00	9.00	0.00	0.00	0.00	0.00	479.00
16	77230AAHF00RS -CENTER REAR COWL (BLACK NH-1 (TYPE-1))	87141090	Paid	97.46	1	9.00	9.00	0.00	0.00	0.00	0.00	115.00
17	3370BAAHA010099S -UNIT TAIL LIGHT	85122010	Paid	315.25	1	9.00	9.00	0.00	0.00	0.00	0.00	372.00
18	33650KST940S -WINKER ASSY.L RR(BULB)	85122010	Paid	148.31	1	9.00	9.00	0.00	0.00	0.00	0.00	175.00
19	K42426AAFAH00S -KIT, WHEEL COMP.REAR	87141090	Paid	3,827.97	1	9.00	9.00	0.00	0.00	0.00	0.00	4,517.00
20	52110AAJ700S -SWINGRAM COMPLETE REAR	87141090	Paid	769.49	1	9.00	9.00	0.00	0.00	0.00	0.00	908.00
Parts Total											0.00	21,762.42

S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount
1	102032 - ACCIDENTAL LABOUR-HF DELUXE	998729	Paid	1,695.00	9.00	9.00	0.00	0.00	0.00	0.00	2,000.10
Jobs Total										0.00	2,000.10
Parts Total											21,762.42
Labour Total											2,000.10
SGST (Parts) 9%											1,659.85
CGST (Parts) 9%											1,659.85
SGST (Labour) 9%											152.55
CGST (Labour) 9%											152.55
Total											23,762.52

Rupees in Words: Twenty Three Thousand Seven Hundred Sixty Two and paise Fifty Two Only

Authorized Signatory

10730 - Main W/S

1. Terms Cash
 2. Prices & statutory levies prevailing at the time of delivery shall be charged
 3. Vehicles in this workshop are handled/driven and kept at owner's risk.
 4. Customers are requested to satisfy themselves with the quality of work done before taking the delivery
 5. Supplementary estimate will be submitted if further damages/parts are required after dismantling the vehicle.
 6. Actual amount may vary from estimate
 7. Garage charges are Rs 50/- per day if vehicle not taken by the customer on delivery date
 8. All disputes subject to jurisdiction of CITY Jurisdiction Only
- #HeroMotocorp can further contact you via Call, SMS or email for feedback or to give information about New launches.