

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.	RAM KRISHNA MISHRA 9120340039,
2	Vehicle No. / वाहन संख्या	UP52CE6147
3	Policy No. / पालिसी संख्या	252400/31/2025/96710
4	Period of Insurance / बीमा अवधि	22/03/2025 - To - 21/03/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	23/12/2025 Time - 9:30 AM.
6	Place of Accident / दुर्घटना का स्थान	धरबै ब्राडी खड़ी ची
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	RAM KRISHNA MISHRA UP5220100005333, 9120340039.
8	Estimated Loss / अनुमानित हानि	9600/-
9	Cause of Accident / दुर्घटना का कारण:	मैं रोड की खाती अपनी गाड़ी को शुल्ह स्तारि कर रहा था स्तारि नहीं होने से मैं जलपति खाती सर्बिस सेक्टर को खुला दिया और फिर मेरी गाड़ी को सर्बिस सेक्टर वाले ने रोक कर के ले कर चले गए सर्बिस सेक्टर हिरा कूपरी एका पद में केरीक द्वारा पक करत के बाद धरा चला की वापस का चुरा के कार दिया।
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.	JANMATA AUTO-MOBILE DEORIA

Date / दिनांक : 30/12/2025
हस्ताक्षर राम कृष्ण मिश्र

राम कृष्ण मिश्र
Signature of Insured / बीमाधारक के

3. DRIVER AT THE TIME OF ACCIDENT

(a) Name RAM. KRISHN MISHRA.
 (b) Age 29/12/1980
 (c) Address KATAPARI, DEORIA (U.P.)
 (d) Is the Driver
 1. Owner YES
 2. paid driver?
 3. Owner's relative or friend? OWNER.
 (e) If paid driver, how long has he been in your employment NA
 (f) Was he under the influence of intoxication Liquor or drugs? NA
 (g) Driving Licence Number UP5220/00005333
 (h) Issuing Authority
 (i) Date of Expiry 04/07/2030
 (j) Was the licence temporary/permanent PERMANENT
 (k) Details of endorsement/suspension, if any NA
 (l) Has he been involved in any accident before? NA
 (m) Has he been charged by the policy? If so, Why? NA

4. OTHER INSURANCE

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

5. DETAILS OF ACCIDENT

Date and Time 23/12/2025 Time 9:30 AM.
 Place रास्ता चारवे रकीपा
 Speed of vehicle at the time of accident
 Give a short description of the accident
 If any third party was responsible for this accident give the name and address

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage ASIPAR ESTIMATE
 (b) Estimated cost of repairs 9600/-
 (c) When and where can the damaged vehicle be inspected GANPATI AUTO. MOBILE. DEORIA

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
 (f) Has notice of any claim been given to you?

NA

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 *राम कृष्ण मिश्र*
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank



GOVERNMENT OF UTTAR PRADESH

Transport Department DEORIA

FORM 23

CERTIFICATE OF REGISTRATION



Registration No : UP52CE6147 Registration Date : 23-Mar-2025
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : GANPATI AUTOMOBILES (DI) PURWA CHAURAHA GKP ROAD DEORIA - 185-274001
 Owner Name : RAM KRISHNA MISHRA Son/wife/daughter of : RAMSHANKAR MISHRA
 Full Address: (Permanent) : VILL H.NO 55 KATARARI, PO KATARARI, PS SURAULI, DEORIA, UTTAR PRADESH - 274001
 Full Address: (Temporary) : VILL H.NO 55 KATARARI, PO KATARARI, PS SURAULI, DEORIA-UTTAR PRADESH - 274001

Fitness UpTo : 22-Mar-2040 Owner Serial No : 1
Detailed Description
 Class of Vehicle : M-CYCLE/SCOOTER Link Vehicle No :
 Ownership : INDIVIDUAL Norms : Not Available
 Maker's Name : HERO MOTOCORP LTD
 Front HSRP No : AA2122688060 Rear HSRP No : AA2125525110
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 02-2025
 No of Cylinders : 0 Chassis No : MBL05W00488B01903
 Engine No : ECD001S6B02556 Fuel : PURE EV
 Horse Power(BHP) : 8.04 Cubic Capacity : 0.00
 Maker's Classification : VIDA V2 PLUS Wheel base : 1301
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleeper Cap : 0 Unladen Wt (kgs) : 124
 Colour : BLACK Laden/GV Wt (kgs) : 274
 Other Criteria : AC Fitted : NO
 Vehi-to 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 IDFC FIRST BANK LTD Deoria, Uttar Pradesh-274001 w.e.f. 23-Mar-2025.

Purchase dt : 21-Mar-2025 Sale Amt : 125000/-
 OTT Date : Amount/Rcpt No :
 Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : EXEMPTED
 Date of Approval : 25-Mar-2025

Other State/Transfer/Conversion/Reasign Details

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

This certificate is valid from 23-Mar-2025 to 22-Mar-2040

Date : 26-Mar-2025 13:05:54

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Transport Authority :
026 Mar-2025

आयकर विभाग
INCOME TAX DEPARTMENT

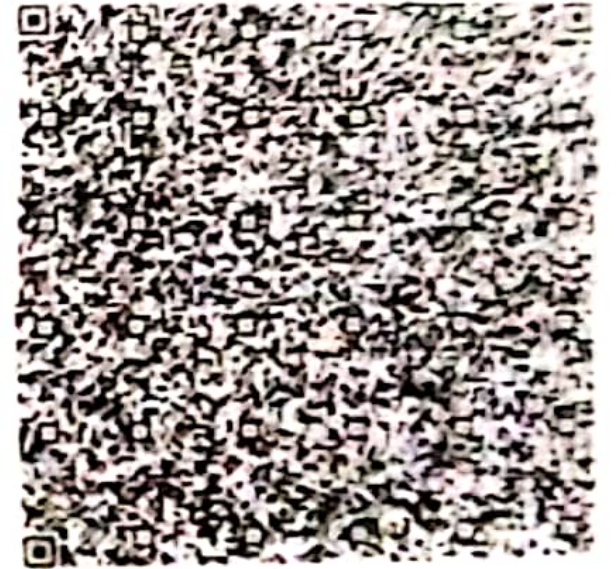


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

AYGPM7476A



नाम / Name

RAM KRISHNA MISHRA

पिता का नाम / Father's Name

RAMSHWAR MISHRA

जन्म की तारीख /

Date of Birth

29/12/1980

रामकृष्ण मिश्रा

हस्ताक्षर / Signature

20092023





भारत सरकार
Government of India



राम कृष्ण मिश्रा
Ram Krishna Mishra

जन्म तिथि/DOB 29/12/1980
पुल्ल / Male



2892 5960 1604

आधार - आम आदमी का अधिकार



भारतीय विश्वविद्यालय
Unique Identification Authority of India

पता S/O रामश्वर मिश्रा
मकान नं०-55, कातरा, देवरिया
उत्तर प्रदेश 274001

Address S/O Ramshwar
Mishra H NO-55 Kataran,
Katran Deoria Uttar
Pradesh 274001

2892 5960 1604



www





Indian Union Driving Licence
Issued by Uttar Pradesh

UP

UP52 20100005333



Issue Date: 17-07-2021
Validity (NT): 04-07-2030

Validity (TR):



Holder's Signature

Date of First Issue: (05-07-2010)

Name: RAM.KRISHUN MISHRA
Date of Birth: 29-12-1980 Blood Group:
Son/Daughter/Wife of: RAMESHWAR MISHRA
Address: KATRARI, DEORIA
DEORIA 274001

Organ Donor: N

DL No: UP52 20100005333

UPDL00000590R2F2



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	UP52	05-07-2010	NT				
LAND	UP52	05-07-2010	NT				
MVSD							

Emergency Contact Number:

UP52 DEORIA

GANPATI AUTOMOBILES

Surwa Chauraha, Deoria
 Mob - 9415383539, 9336531183

ESTIMATE

Owner's Name: RAM. KRISHNA MISHRA
 Address: DEORIA
 Phone: 9120340039

Job No.
 Date: 01/11/26
 Chasis No.
 Engine No.
 Key No.
 Regn. No. UP52CE 6147
 Speedmeter Redg.
 Insurance No.
 Model: NIDA V2

Dear Sir,

Here Under we are forwarding our estimate for your acceptance, Please sign and return copy to us so that we may take up the work in hand.

S. No.	Details of Job	Qty.	Rate	Amount	
				Rs.	P.
1	labouring (94 feet)	15	9000	5000	
2					
3					
4					
5					
6					
7					
8					
9	labour			900	
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
TOTAL				9600	

- Note:
1. If required, labour for above material shall be charged extra.
 2. Price of parts are subject to change without notice.
 3. VEHICLE DELIVERY AGAINST PAYMENT ONLY.
 4. All Disputes Subject to Deoria Jurisdiction only.

We agree with the conditions and approve the estimate.

Customer's Signature.....

Ganpati Automobile
 Gorakhpur Road
 For **Ganpati Automobiles**
 DEORIA
 Mob: 77010047

Authorised Signatory



The Oriental Insurance Company Ltd.
Policy Schedule

Report No: 70000000

Page No: 1

TAX INVOICE/CERTIFICATE COM POLICY SCHEDULE

(FORM 51 OF THE CENTRAL MOTOR VEHICLES RULES, 1989)

DIVISIONAL OFFICE, 346 KHAIR NAGAR, OPP. FUMESTAN CINEMA MEERUT, PIN-221003, U.P., (GSTIN: 09AAACT0617042U)

Policy Type	BUNDLED POLICY (MOTORISED TWO WHEELERS) (3 Years)	Policy Issued On	22-MAR-25
Policy No	252400-31-2025-9071	Proposal No. & Date	P-252400-31-2025-90440321 & 22-MAR-2025
Agent/Broker Code	BA0000155144	Policy Period (OWN DAMAGE)	FROM 14-03-2025 TO MIDNIGHT OF 13-03-2028
Agent/Broker Name	ABHINAV BHATI	Policy Period (LIABILITY)	FROM 14-03-2025 TO MIDNIGHT OF 13-03-2028
Insured Name	RAM KRISHNA MISHRA (GSTIN:)	Compulsory PA	FROM 14-03-2025 TO MIDNIGHT OF 13-03-2028
Insured Address	C/O RAMSHWAR MISHRA R/O ADD: H NO 44 KATARARI PO KATARARI PS BURAI ILI DEORIA, N.A.O	Lead/Breakin No	
		Insured State	UTTAR PRADESH

INSURED MOTOR VEHICLE DETAILS		INSURED DECLARED VALUE (IDV) (IN Rs.)	
Make	HERO	Vehicle	109250
Model & Variant	VIDA V2 PLUS	Electrical Accessories	0
Registration No	NFW	Non-Electrical Accessories	0
Year Of Manufacture	2025	Total IDV	109250
Registration/Chassis No	NCD0015A902564 - JMRUCZHQW4S057659	TIME CONTRACT NO	
Cubic Capacity	6	Policy Type	Zone B - Rest of India
Seating Capacity	1 + 1	Geographical Area	
Type Of Body	SOLO	Type Of Fuel	BATTERY POWERED-ELECTRICAL

Schedule Of Premium (Amount In Rs.)			
OWN DAMAGE SECTION(A)		LIABILITY SECTION (B)	
Vehicle	183.03	Basic Third Party Liability	1273
Elec. Accessories	0	Compulsory PA Cover Premium	360
Non-Elec. Accessories	0	PA Cover for 0 Person (0 Rs) (0) each (IMT-18)	0
Basic Premium	183.03	Legal Liability (NCT) to driver (IMT-28)	0
Geographical Area Extra (GMT -1)	0	Legal Liability to employees (IMT-29)	NA
Driving Tuition Loading On OD Premium (60%)	0	Legal Liability to Passenger (IMT-46)	NA
Sub-Total Additions	0	Driving Tuition Loading On TP Premium (60%)	0
Deductibles	0	PA Paid Driver, Conductor, Cleaner (GSA&D)	3633
Voluntary Deductibles (IMT 22A)	0	Net Liability Premium (B)	4070
Anti-Theft Device (IMT-19)	0	Govt Premium (S&D)	512
AAI Membership (IMT-4)	0	GST	0
No Claim Bonus	0	SERVICE TAX	0.00
Discount for vehicle designed for handicapped	0	SI&MPDUTY	0
STP Income	0	Swachh Bharat Cess @ 0.50%	0
Sub-Total Deductibles	0	Krishi Kalyan Cess @ 0.50%	4894
Add-On Coverages	273	Gross Premium Paid	
NIL Depreciation			
Returns to Invoice	0		
Key Replacement	0		
Consumables	273		
Sub-Total Add-on Coverages	439		
Net own Damage Premium(A)			

Number Details:	Nominee Name	Cheque No./Transaction No	Bank Name	Amount
Payment Details:	Payment Method	Financer Name	Financer Branch	DEORIA
Financer Type	POS ID	IFSC FIRST BANK LTD	POS PAN NO-Aadhar No	NA
POS Name	NA			

In the event of a claim under the policy exceeding Rs 100 or a claim for refund of premium exceeding Rs 100, the insured will comply with the provisions of the AMI policy or the Company. The AMI policy is available on our operation Offices as well as company's website.

The insured under the policy is subject to conditions, exclusions, limitations, IMT's and PBD's as mentioned in the policy, which are available on company's website.

Wherever the insured is engaged in an occupation from the policy issuing office.

Wherever the insured is engaged in an occupation from the policy issuing office.

Claim is not admissible if driving license is found fake or is not valid or holder is not in the knowledge of the insured.

We hereby certify that the policy to which the certificate relates as well as this certificate of insurance are issued in accordance with the provision of Chapter X and Chapter XI of Motor Vehicles Act, 1988.

In witness whereof the undersigned being authorized by and on behalf of the company has hereunto set his/her hand at 252400 on 22-MAR-25.

IMPORTANT NOTICE

The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with the schedule A/B. Payment made by the company by reason of under terms appearing in the certificate is meant to comply with the MV Act, 1988 and is recoverable from the insured for the clause headed "AVOIDANCE OF CERTAIN AND RIGHTS OR RECOVERY".

Limitations as to use: It is only for social, domestic and pleasure purpose and the insured's business. The Policy does not cover the use for: (1) Hire or reward (2) Passage of goods other than samples or personal baggage (3) Operation of any (1) Taxicab (2) School bus (3) Public utility vehicle.

Any Person including the insured, 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 driving is not under the influence of any intoxicating liquor.

Driver's Consent: Any person including the insured, 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 driving is not under the influence of any intoxicating liquor.

Limit of Liability: Clause 1 under section II-1 of the policy. Death of or body injury: Such amount is necessary to meet the requirements of the motor vehicle act 1988. Section II-1 of the policy. Damage to third party property is Rs 7.5 lakhs (PA Cover under section III for owner-Driver is Rs 1500000).

No Claim Bonus: The insured is entitled for a No Claim Bonus (NCB) on the own damage section of the policy if no claim is made or pending during the preceding year or any part of the preceding year (20% for the first year, 25% for the second year, 30% for the third year, 35% for the fourth year, 40% for the fifth year, 45% for the sixth year, 50% for the seventh year, 55% for the eighth year, 60% for the ninth year, 65% for the tenth year).

We hereby certify that the policy to which this certificate relates as well as the certificate of insurance are issued in accordance with the provisions of Chapter X and XI of M.V. Act, 1988.

* This insurance excludes all pre-existing damages.

For and on behalf of
The Oriental Insurance Company Limited

Approved By: LNV10252400
Approved On: 22-MAR-25
Place: NRT
Printed On: 14-MAR-25

General Manager
Authorized Signatory