

# GANPATI AUTOMOBILES

Purwa Chauraha, Deoria  
 Mob. - 9415383539, 9336531183

## ESTIMATE

Owner's Name: SAKET KEDIA  
 Address: DEORIA  
 Phone: 933518 9338

Job No. ....  
 Date: 23/01/2026  
 Chasis No. ....  
 Engine No. ....  
 Key No. ....  
 Regn. No. UP52BA-7758  
 Speedmeter Redg. ....  
 Insurance No. ....  
 Model: SPL+

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	VIBRO	15	1100	1100	
2	PHIL	15	535	535	
3	Mitter Sact	16	1375	1375	
4	Hamdle	16	500	500	
5	Hamdle F-Fork. L&R. Relay	—	—	550	
6					
7					
8					
9					
10					
11					
12					
13	<i>Repair</i>			500	
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
<b>TOTAL</b>				<u>4560</u>	

- 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  
 For - Ganpati Automobiles  
 OPP. L.P. Road  
 DEORIA  
 Mob 770004711

Authorized Signatory

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.	SAKET KEDIA, 9935189338.
2	Vehicle No. / वाहन संख्या	UP52BA-7758.
3	Policy No. / पालिसी संख्या	MS/2025/7001/0/46575/459320
4	Period of Insurance / बीमा अवधि	03/08/2025-70-02/08/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	30/08/2025 Time- 9:30 Am.
6	Place of Accident / दुर्घटना का स्थान	कचहरी चौराहा (देवता)
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	SAKET KEDIA, UP5220/30006052, 9935189338,
8	Estimated Loss / अनुमानित हानि	
9	Cause of Accident / दुर्घटना का कारण : जालकिया रोड से कचहरी जा रहे थे। रास्ते में कचहरी चौराहा पर डी.डी.के. बालेने गेरी गाड़ी को सामने से ठक्कर मार दिया जिससे गेरी गाड़ी बायां सड़ि ऑफिस में अटिअत हो गयी।	
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 / फोन नं.	GANPATI A.C.B. MOBILE DEPARTMENT, P.

Date / दिनांक : 03/01/2026  
हस्ताक्षर  
Saket Kedia

Signature of Insured / बीमाधारक के  
Saket Kedia



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 \_\_\_\_\_ Certificate/Policy No. 015/2025/1001/0/46575/959320  
 Tel. No. \_\_\_\_\_ Period of Insurance 03/08/2025 - To. 02/08/2026  
 Claim No. \_\_\_\_\_

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

(a) Name INSURED SHAKET. KEDIA.  
 (b) Address for correspondence MALVIYA ROAD. PAFORIA. (C.P.)  
 (c) Telephone \_\_\_\_\_

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2019</u>	Engine No. * <u>7857</u> Chassis No. * <u>66663</u>	Registration No. <u>UP52BA</u> <u>7758</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? PERSONAL USE.  
 (c) Was trailer attached? \_\_\_\_\_  
 (d) If a Motor Cycle/scooter NA  
 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. NA  
 (d) Nature of permit \_\_\_\_\_  
 (e) Nature of goods carried \_\_\_\_\_  
 (f) Was the vehicle plying for hire \_\_\_\_\_  
 (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 SAKET KEDIA  
 (b) Age 17/02/1990  
 (c) Address MALVIYA ROAD 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 UPS220130006052  
 (h) Issuing Authority  
 (i) Date of Expiry 12/05/2033  
 (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

(a) Date and Time 30/12/2025 30 km/h Time 9:30 AM  
 (b) Place कचहरी मोरघाट का गालगि रोड रो कचहरी मोरघाट  
 (c) Speed of vehicle at the time of accident  
 (d) Give a short description of the accident दोनों गाड़ियाँ एक-दूसरे को टक्कर मारी और दोनों गाड़ियाँ क्षतिग्रस्त हुईं।  
 (e) If any third party was responsible for this accident give the name and address संज्ञात नहीं

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage AS PER ESTIMATE  
 (b) Estimated cost of repairs  
 (c) When and where can the damaged vehicle be inspected GANATI AUR MOBILE DEORIA (U.P)

7. THIRD PARTY INJURY/PROPERTY DAMAGE

(a) Name  
 (b) Address NA  
 (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?

8. INJURY TO DRIVER/OCCUPANT

NA

- (a) Was driver/any occupant injured?
- (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?
- (d) If yes, to which Police Station?
- (e) Date and Diary No

NA

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?
- (g) When?
- (h) Which Police Station?
- (i) C.R. diary Number

NA

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 03/01/2025

Signature of the insured Saket Kedia

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 Saket Kedia.....  
Occupation .....  
Address .....  
.....

Bank Account Number .....  
Name of the Bank .....

GOVERNMENT OF UTTAR PRADESH

Transport Department, Deoria

FORM 22

CERTIFICATE OF REGISTRATION



Registration No : UP52BA7258  
Description of Vehicle : M-CYCLE/SCOOTER  
Dealer's Name & Address : GANPATI AUTOMOBILES (D)  
Owner Name : SAKET KEDIA  
Full Address: (Permanent) : VILL SURAJMAL MATHURA PRASAD, MALVIYA ROAD, PO&PS DEORIA, DEORIA, UTTAR PRADESH-274001  
Full Address: (Temporary) : VILL SURAJMAL MATHURA PRASAD, MALVIYA ROAD, PO&PS DEORIA, DEORIA, UTTAR PRADESH-274001

Registration Date : 09-Jul-2019  
Purpose For Printing RC : NEW  
PURWA CHAURAHA GKP ROAD, DEORIA,  
UMESH KUMAR KEDIA  
Son/wife/daughter of  
VILL SURAJMAL MATHURA PRASAD, MALVIYA ROAD, PO&PS DEORIA, DEORIA,  
UTTAR PRADESH-274001

Fitness UpTo : 08-Jul-2034  
Owner Serial No : 1  
Detailed Description :  
Class of Vehicle : M-CYCLE/SCOOTER  
Ownership : INDIVIDUAL  
Maker's Name : HERO MOTORCYCLE LTD  
Front HSRP No : AA2002573315  
Type of Body : SOLID WITH PILLION  
No of Cylinders : 2  
Engine No : HATGAG 1547857  
Horse Power(BHP) : 8.24  
Maker's Classification : SPLENDOR (BEAR DRUM Wheel CAST)

Tax Up To : One Time  
Link Vehicle No : BHARAT STAGE IV  
Norms :  
Rear HSRP No : AA2001625445  
Month/Year of Manuf : 06/2019  
Chassis No : MBLHAW093KHF66663  
Fuel : PETROL  
Capacity : 97.20  
Wt (kg) : 1230  
Wt (kg) : 112  
Wt (kg) : 245  
AC Fitted : NO



Seating Cap(In all) : 2  
Sleeping Cap : 0  
Colour : Grey  
Other Criteria : Fully Built  
Vehicle Purchase As :  
Additional Particulars of all transport vehicles other than motor cabs (Gross Vehicle Weight)  
By Manual :  
a) Front :  
b) Rear :  
c) Other :  
d) Tandem :

Weight (in Kgs)  
53365  
Registration No : 9337 / UP52D19060003829  
Vehicle Is Govt./ Pvt. : PRIVATE  
Date of Approval : 09-Jul-2019  
Previous Reg No :  
Entry Date :  
Conversion Date :  
Signature of Registering Authority :  
Date : 25-Jul-2019

The motor vehicle above described is subject to Hypothecation in favour of w.e.i.  
Purchase dt : 21-Jun-2019  
OTT Date : 21-Jun-2019  
Tax Up To : Orig Time  
Tax Exempted or Not : NOT EXEMPTED  
Other State/Transfer/Conversion Details :  
Previous Owner :  
Old State :  
Transfer Date :

Sale Amt : 53365  
Registration No : 9337 / UP52D19060003829  
Vehicle Is Govt./ Pvt. : PRIVATE  
Date of Approval : 09-Jul-2019  
Previous Reg No :  
Entry Date :  
Conversion Date :  
Signature of Registering Authority :  
Date : 25-Jul-2019

Date : 25-Jul-2019 15:22:50  
Taxation Particulars / Advance Registration Mark Fee Details :

I- 1128826

# Program Proposal Two-Wheeler Package Contract - Bundled



Contract No.: MS/2025/7001/D/46575/459320

Care Private Limited  
 Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India  
 Phone: 79410 50643  
 Email: info@motorsathi.com  
 For help section of www.motorsathi.com

Name of Certificate Holder	Date of Birth	Mobile No.	Father/Husband Name	Make	Model
SAKET KEDIA	1990-02-17	9935189338	UMESH KUMAR KEDIA	Hero Motocorp	SPLENDOR PLUS
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity   Vehicle Type
SILVER	UP52BA7758	HA10AGKHFA7857	MBLHAW09JKHF06663	2019-07-09	100   TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV
30000.00	NA	0.00	0.00	0.00	30000.00
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	1489.59
Address			City / District	Pin Code	State
VILL. SURAJMAL MATHURA PRASAD, MALVIYA ROAD, PO&PS DEORIA, Dooria, Uttar Pradesh, 274001				274001	Uttar Pradesh
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
JYOTI KEDIA	Female	30 Years	WIFE	2025-08-03 16:15	Midnight of 2026-08-02

Section A, VRC: 572.29 TCR: 0.00 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (40%): 229.49 Total with GST (A): 342.80

Section B, EC: 664.00 EC Service: 100.00 ECPD: 0.00 Sub Total: 764.00 TAC: 0.00 ENC: 0.00 EDC: 0.00 MCPD: 0.00 Total (B): 764.00 GST (CGST @9% + SGST @9%) (B): 137.52 Total with GST (B): 901.52

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: 207.86 AHDC, DOC & Additional External Tyre Cover (AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 37.41 Total with GST (D): 245.27

Total (Section A+B+C+D) Offered Price After Discount: 1490

Package Period Covered	2025-08-03 To 2026-08-02	2026-08-03 To 2027-08-02	2027-08-03 To 2028-08-02	2028-08-03 To 2029-08-02	2029-08-03 To 2030-08-02
ADV	30000	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 from 2025-08-03 until 2026-08-02.

**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 1 lakh 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 1489.59 ON 2025-08-01 from Mr./Ms. SAKET KEDIA against the ARN No. INCP00459320

The 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: BMT - 22, 16, 18

Customer Service Address: B.Daas Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001), India



UNION OF INDIA Driving Licence



UP52 20130006052



13/05/2013

12/05/2033

17/02/1990

Unknown

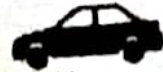
MR. NAME

SAKET KEDIA

प्राप्तकर्ता/पत्नी का नाम - Son/Daughter's Name

UMESH KEDIA

UP52 20130006052



1 MV  
13/05/2013



MCWG  
13/05/2013

जारीकर्ता

VIL SAS BHAI COLLECTION MALUIYA ROAD  
PO SADAR PS KOTWALI  
DEORIA -

*Saket Kedia*  
Holder's Signature

जारीकर्ता / Issuing Authority Sign  
Deoria





साकेत केडिया  
**Saket Kedia**  
 जन्म तिथि/DOB: 17/02/1990  
 पुरुष/ MALE



**8918 2361 7821**

**मेरा आधार, मेरी पहचान**

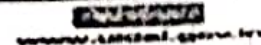


~~संयुक्त परिवार~~  
~~संयुक्त परिवार~~

**Address:**  
 S/O Umesh Kumar Kedia, Sas  
 Behu Collection, Malviya Road,  
 Deoria, Deoria,  
 Uttar Pradesh - 274001

**पता:**  
 S/O उमेश कुमार केडिया, सास भु कलेक्शन,  
 मालवीय रोड, देवरिया, देवरिया,  
 उत्तर प्रदेश - 274001

**8918 2361 7821**



आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार

GOVT. OF INDIA

SAKET KEDIA

UMESH KUMAR KEDIA

17/02/1990

Permanent Account Number

BBFPK6052F

Saket Kedia

Signature



05072014