

# GANPATI AUTOMOBILES

Deoria Chauraha, Deoria

## ESTIMATE

7704004913, 7704800558.  
 Owner's Name VIVEKANAND Dwivedi  
 Address DEORIA  
 Phone 9889503235

Job No. ....  
 Date 29.11.2026  
 Chasis No. ....  
 Engine No. ....  
 Key No. ....  
 Regn. No. UP52BX9562  
 Speedmeter Redg. ....  
 Insurance No. ....  
 Model SUPER S.P.L.

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	R.R. Fender -	1PC	900	900	
2	TIL	1PC	560	560	
3	Seat. Cushion. L&R.	2PC	700	1400	
4	Connector -	1PC	250	250	
5	R.R. Limker - L	1PC	230	230	
6	Handle -	1PC	550	550	
7	Visor -	1PC	900	900	
8	HIL	1PC	3550	3550	
9	Behind. Sensor -	1PC	390	390	
10	Crossbar -	1PC	180	180	
11	F-Fender -	1PC	1250	1250	
12					
13					
14					
15					
16					
17	Labour -			600	
18					
19					
20					
21					
22					
23					
24					
25					
<b>TOTAL</b>				10760	

- 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.

I We agree with the conditions and approve the estimate.

Customer's Signature.....

**Ganpati Automobiles**  
 For Ganpati Road  
 OPP. D.I. Chauraha  
 DEORIA  
 7704004913

Authorised 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.	NIVEKANAND DWIVEDI 9839503235
2	Vehicle No. / वाहन संख्या	UP52BX9562
3	Policy No. / पालिसी संख्या	ms/2025/7001/0/46575/408662
4	Period of Insurance / बीमा अवधि	20/02/2025 - To - 19/02/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	18/01/2026 Time - 11:35 AM.
6	Place of Accident / दुर्घटना का स्थान	छोटी बग्गी (देवरिया)
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	NITESH KUMAR YADAV UP5220110001856, 9839503235
8	Estimated Loss / अनुमानित हानि	
09.	Cause of Accident / दुर्घटना का कारण:	पुरवा से तेवरही म.वीर जाते समय रास्ते में छोटी बग्गी मोड़ पर विट्टे से इ-रिक्शा में तककर मार दिया जिससे मोरी जाड़ी बायें साइड गिरकर अतिग्रस्त हो गई
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 ACH. MOBILE DEBARIA

Date / दिनांक : 23/01/26  
हस्ताक्षर  
Vivekanand Dwivedi

Vivekanand Dwivedi  
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/2025/7001/6/46575/408662  
 Period of Insurance 20/02/2025 - 19/02/2026  
 Claim No. \_\_\_\_\_

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

1. THE INSURED  
 (a) Name VIVEKANAND, DWIVEDI  
 (b) Address for correspondence VISANPURA, DEORIA  
 (c) Telephone \_\_\_\_\_

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2023</u>	Engine No. <u>15339</u> Chassis No. <u>50552</u>	Registration No. <u>UP52RX</u> <u>9562</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. \_\_\_\_\_  
 (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 : NITISH KUMAR YADAV  
 (b) Age : 6108/1991  
 (c) Address : PEORIA  
 (d) Is the Driver  
 1. Owner : No  
 2. paid driver? : No  
 3. Owner's relative or friend? : FRIEND..

(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 : UPS2201/0001856  
 (h) Issuing Authority :  
 (i) Date of Expiry : 20/02/2031  
 (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 : 18/01/2026 30km Time: 11:35 am  
 (b) Place : धौली रोड  
 (c) Speed of vehicle at the time of accident :  
 (d) Give a short description of the accident : पूर्व से देवही गाड़ी जाते समय रास्ते में मोती बेनी गाड़ी पर पीछे से S-रिश्ताई टक्कर मार दिया जिससे मोती बेनी गाड़ी बाय साइड जाकर बलुआ रोड पर रुकी  
 (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 : AS PER ESTIMATE  
 (b) Estimated cost of repairs :  
 (c) When and where can the damaged vehicle be inspected : GIANPATI AUTO MOBILE PEORIA

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

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? : NA  
(c) Was accident reported to Police? If not, Why? : \_\_\_\_\_  
(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? : NA  
(f) Has theft been reported to Police? : \_\_\_\_\_  
(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 23/01/26  
\_\_\_\_\_ 200

Signature of the insured Vivekanand Dwivedi

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 *Vivekanand Dandi* .....  
Occupation .....  
Address .....  
.....  
.....

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



# GOVERNMENT OF UTTAR PRADESH

Transport Department DEORIA

FORM 23

## CERTIFICATE OF REGISTRATION

Registration No : UP52BX9562 Registration Date : 13-Nov-2023  
Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW  
Dealer's Name & Address : GANPATI AUTOMOBILES (D) PURWA CHAURAHA GKP ROAD, DEORIA, ., 100-274001  
Owner Name : VIVEKANAND DWIVEDI Son/wife/daughter of : VISHRAM DWIVEDI  
Full Address: (Permanent) : VILL- CHIURHA KHAS, PO- VIKRAM VISHANPUR PS- MAHUADIH, DEORIA, DEORIA,  
UTTAR PRADESH-274001  
Full Address: (Temporary) : VILL- CHIURHA KHAS, PO- VIKRAM VISHANPUR PS- MAHUADIH, DEORIA, DEORIA-  
UTTAR PRADESH-274001  
Fitness UpTo : 12-Nov-2038 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 : AA2081427134 Rear HSRP No : AA2083471040  
Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 10/2023  
No of Cylinders : 1 Chassis No : MBLJAW399P9K50552  
Engine No : JA07AMP9K15339 Fuel : PETROL  
Horse Power(BHP) : 10.72 Cubic Capacity : 124.70  
Maker's Classification : SUPER SPLENDOR XTEC D Wheel base : 1267  
S  
Seating Cap(in all) : 2 Standing Cap : 0  
Sleepar Cap : 0 Unladen Wt (kgs) : 123  
Colour : BLACK Laden/GV Wt (kgs) : 253  
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.	As Regd.	Description	Weight(in kgs)
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- a) Front:
- b) Rear:
- c) Other:
- d) Tandem:

The motor vehicle above described is subject to Hypothecation in favour of HERO FINCORP LTD, DEORIA, ., Deoria, Uttar Pradesh-274001 w.e.f. 11-Nov-2023.

Purchase dt	: 08-Nov-2023	Sale Amt	: 88528/-
OTT Date	: 03-Nov-2023	Amount/Rcpt No	: 8853 / UP52D23110002024
Vehicle is Govt./ Pvt.	: PRIVATE	Tax Exempted or Not	: NOT EXEMPTED
Date of Approval	: 17-Nov-2023		

Other State/Transfer/Conversion Details

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

This certificate is valid from 13-Nov-2023 to 12-Nov-2038

Date : 29-Nov-2023 18:10:09

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority

Date : 29-Nov-2023

4864911





## Package Offer

2025-02-20

Mr./Ms. VIVEKANAND DWIVEDI

VILL- CHHURHA KHAS, PO- VIKRAM VISHANPUR PS- MAHUADIII, DEORIA, Deoria, Uttar Pradesh, 274001

. Uttar Pradesh, 274001

Dear Mr./Ms. VIVEKANAND DWIVEDI,

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](mailto:info@motorsathi.com) or visit our website at [www.motorsathi.org](http://www.motorsathi.org) or download Motorsathi app from play store for guidance from Motorsathi.**

Mr./Ms. VIVEKANAND DWIVEDI, 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](mailto:info@motorsathi.com)

Website: [www.motorsathi.org](http://www.motorsathi.org)



Please scan the QR for details



# Program Proposal Two-Wheeler Package Contract - Bundled



Contract No.: MS-2025 7001(3) 46575 408662

**MotorSathi Private Limited**  
 B.D. 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	
VIVEKANAND DWIVEDI	1992-07-22	9836502215	VISHRAM DWIVEDI	Hiroo Motorcycle	STEELER SUPER 150	
Sub Model	Vehicle Regn. No	Engine No	Chassis No	Year of Mfg	Cubic Capacity	Vehicle Type
DRUM SELE CAST BLA	UP52BX9562	JA07AMP9K17334	MHLJAW39999K50552	2024	115	150
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG LPG/Bi-Fuel ADV	Total ADV	
59500.00	NA	0.00	0.00	0.00	59500.00	
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	1703.74	
Address			City - District	Pin Code	State	
VILLAGE - BHAKHAN, PO-VIRRAM, SPAN7, R.P.S. MACHHOLI, DIST. NAGARWARA, District, Uttar Pradesh, 274001					Uttar Pradesh	
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
MADHU	Female	16 Years	SPT	2025-02-20 17:12	Motorsathi 2025-02-19	
Section A. VRC 796.53 TCR 280.84 Less Handicapped Discount 0.00 For Anti-Theft Discount 0.00 (30) INS (0%) 0.00 Total with GST(A) 1077.37						
Section B. FC 0.00 IC Service 0.00 ECPD 0.00 Sub Total 0.00 TAC 0.00 INC 0.00 EDC 0.00 (5) 7.00 Total(B) 0.00 GST (CGST @9% + SGST @9%) (B) 0.00 Total with GST(B) 0.00						
Section C. MS Services(O) 241.53 MS Services(D) 0.00 MS Services(P) 0.00 GST (CGST @9% + SGST @9%) 43.47 Total MS Services with GST(C) 285.00						
Section D. Drive Assure 289.30 AHDC, DDC & Additional External Tyre Cover(AFTC) Other Discounts 0.00 GST (CGST @9% + SGST @9%) 52.67 Total with GST(D) 341.97						
<b>Total(Section A+B+C+D) Offered Price After Discount: 1703.74</b>						
Package Period Covered	2025-07-20 To 2026-02-19		2026-07-20 To 2027-02-19	2027-07-20 To 2028-02-19	2028-07-20 To 2029-02-19	2029-07-20 To 2030-02-19
ADV	59500		NIL	NIL	NIL	NIL
MS Services Period Covered (NODI)	1 Year		NIL	NIL	NIL	NIL

\*THE ABOVE IS COVERED IN THIS CONTRACT (HAY) & VALIDITY COVERAGE TAKEN FROM AN INSURANCE COMPANY IS AT 10% (2024-25) TO 10% (2025-26) & 10% (2026-27) & 10% (2027-28) & 10% (2028-29) & 10% (2029-30) & 10% (2030-31)

**LIMITATIONS AS TO USE:** This package covers use of the vehicle for any purpose other than Hire or Forward to Carriage of goods (other than samples or personal baggage) or Organized Rally, (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 Dishonour. The company may cancel the package by sending 7 days notice in case of fraud misrepresentation, non-disclosure 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 AMF package of the company. The AMF package is available in all operating offices as well as Company website.

**TO REGISTER REQUEST PLEASE CONNECT WITH MOTORSAATHI CARE PRIVATE LIMITED Website: www.motorsathi.com Customer Care: Toll free Phone No: 1940000000 Email: info@motorsathi.com**



**IMPORTANT NOTICE:** The coverage is not underwritten if the vehicle is used for any purpose other than Hire or Forward to Carriage of goods (other than samples or personal baggage) or Organized Rally, (d) Pace Making (e) speed Testing (f) Reliability Trials (g) Any purpose in connection with Motor Trade. 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 1703.74 ON 2025-02-20 from Mr./Ms. VIVEKANAND DWIVEDI against the ARN No. INC P00408662  
 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: IMT: 22/06/18  
**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



विवेकानंद द्विवेदी  
Vivekanand Dwivedi  
जन्म तिथि/DOB: 22/07/1992  
पुरुष/ MALE

**5154 8463 7820**  
VID : 9185 7344 8917 3471

मेरा आधार, मेरी पहचान



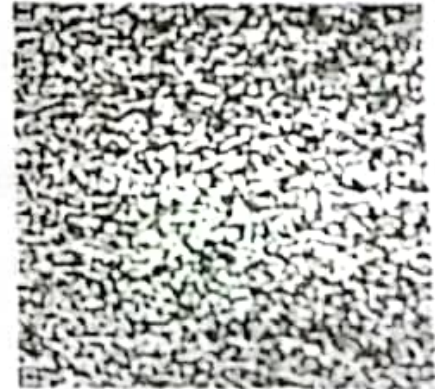
भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:

S/O विश्राम द्विवेदी, चिउरहा खास, देवरिया, देवरिया,  
उत्तर प्रदेश - 274001

Address :

S/O Vishram Dwivedi, chiurha khas,  
Deoria, Deoria,  
Uttar Pradesh - 274001



**5154 8463 7820**

VID : 9185 7344 8917 3471



1947  
1800 300 1947



help@uidai.gov.in



www.uidai.gov.in

P O Box No 1947,  
Bengaluru-560 001



आयकर विभाग  
INCOME TAX DEPARTMENT



भारत सरकार  
GOVT. OF INDIA

VIVEKANAND DWIVEDI

VISHRAM DWIVEDI

22/07/1992

Permanent Account Number

AXKPD1523A

*Vivekanand Dwivedi*

Signature



26082010



Indian Union Driving Licence  
Issued by Uttar Pradesh



UP52 20110001856



Issue Date	Validity (NT)	Validity (TR)
11-09-2019	29-02-2021	-----



Holder's Signature

Name: **ANISH KUMAR YADAV**  
 Date of Birth: **04-08-1991** Blood Group: **B+ VE** Organ Donor: **N**  
 Son/Daughter/Wife of: **SALRAM YADAV**  
 Address:  
**SAIKYA ANANT G IESTATE**  
**DEORIA 274001**