

GANPATI AUTOMOBILES

Purwa Chauraha, Deoria

Mob. 9416000000, 9370511100, 7709800388

ESTIMATE

Owner's Name: Menu Kumar, Grand

Address: Deoria

Phone: 9311139361

Job No.
 Date: 20/01/20
 Chasis No.
 Engine No.
 Key No.
 Regn. No. UP52 BL 2217
 Speedometer Rcdg.
 Insurance No.
 Model: RENOVA

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	Visor - (L/R)	2	250	500	
2	Handle - (L/R)	1	650	650	
3	Wind Screen	1	390	390	
4	Cream	1	200	200	
5	f. fender	1	1400	1400	
6	Tank Saver (L)	1	755	755	
7	Tank Saver - Inner (L)	1	125	125	
8	Fuel Tank	1	8800	8800	
9	Handle	1	500	500	
10	f. Mirror (L)	1	250	250	
11	Seat ground	1	8000	8000	
12	f. fender - Complete L/R	2	22500	45000	
13	Member (L)	1	150	150	
14	Line (L)	1	100	100	
15	T/L	1	650	650	
16	f. mirror - 12/20	-	-	1250	
17					
18					
19					
20					
21	As per			500	
22					
23					
24					
25					
TOTAL				21700	

- 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 _____

For **Ganpati Automobiles**
 Gorakhpur Road
 OPP. Dr. G. N. DEORIA
 DEORIA
 221002
 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.	MENU KUMAR GOND & 9517179361
2	Vehicle No. / वाहन संख्या	UP52BL5517
3	Policy No. / पालिसी संख्या	MS/2025/7001/C/46575/463414
4	Period of Insurance / बीमा अवधि	22/08/2025 to 21/08/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	28/01/2026 @ 11:00AM
6	Place of Accident / दुर्घटना का स्थान	लाह रोड
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	GOVIND KUMAR GOND & UP5220140007115 - 9517179361
8	Estimated Loss / अनुमानित हानि	
09. Cause of Accident / दुर्घटना का कारण : लाह से सलेमपुर अप्रैसाइमेन्ट रोड से लाह बाना से 200 मिटर आगे रोड पर साथने अचानक बाईक का जंपा उभरे गयी गाड़ी टकरा हो गयी जिससे मेरी गाड़ी बायो राईड गील पर आतंक्रत 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 Purwan Deerwah & 7651989597

Date / दिनांक : 29/01/26
हस्ताक्षर मीनु कुमार

मीनु 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 _____

Certificate/Policy No MS/2025/7001/C/463414

Tel. No. _____

Period of Insurance 22/08/2025 to 21/08/2026

Claim No _____

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

1 INSURED
 (a) Name MANU KUMAR GOND
 (b) Address for correspondence Bahia Gauri
 (c) Telephone 9517179361

2 THE INSURED VEHICLE

Make & Year <u>Hero-2021</u>	Engine No Chassis No. <u>* 11297</u> <u>* 02331</u>	Registration No <u>HP52 BL 5517</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
 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
- NA



3. DRIVER AT THE TIME OF ACCIDENT

(a) Name : GOVIND KUMAR GOND
 (b) Age : 21/07/1989
 (c) Address : PURAINI
 (d) Is the Driver
 1. Owner : NA
 2. paid driver? : NA
 3. Owner's relative or friend? : Relative
 (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 : UP5220140007115
 (h) Issuing Authority : 22/05/2014
 (i) Date of Expiry : 27/05/2034
 (j) Was the licence temporary/permanent : permanent
 (k) Details of endorsement/suspension, if any : _____
 (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 : NA

5. DETAILS OF ACCIDENT

(a) Date and Time : 28/11/2026 & 11:00 AM
 (b) Place : PAR
 (c) Speed of vehicle at the time of accident : 40 KM/H
 (d) Give a short description of the accident : _____
 (e) If any third party was responsible for this accident give the name and address : जो हमें मालूम है वह है जो वाहन चला रहा था उसे देना है जो हमें मालूम है
जिसने हमें मालूम है वह है जो वाहन चला रहा था उसे देना है जो हमें मालूम है
जिसने हमें मालूम है वह है जो वाहन चला रहा था उसे देना है जो हमें मालूम है

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage : As per Estimated
 (b) Estimated cost of repairs : _____
 (c) When and where can the damaged vehicle be inspected : Comptrol Automobiles Purwar Daria
7651929597

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? _____
(b) If yes, give full details _____ *NA*

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 _____
(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? _____ *NA*
(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 29/01/26
200

Signature of the insured मोहन कुमार

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. _____

Color Stamp
Revenue Stamp
Witness Affidavit
Excise No. 5000-

Witness
Name
Signature
Address

Signature मि. कुमार
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank

GOVERNMENT OF UTTAR PRADESH

Transport Department Deoria

FORM 23

CERTIFICATE OF REGISTRATION



Registration No : UP52BL5517 Registration Date : 19-Jun-2021
 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 : MONU KUMAR GOND Son/wife/daughter of : RAM KALPH GOND
 Full Address: (Permanent) : VILL BALUA GAURI, PO ROPAN CHHAPRA, PS LAR SALEMPUR, DEORIA, UTTAR PRADESH 274502
 Full Address (Temporary) : VILL BALUA GAURI, PO ROPAN CHHAPRA, PS LAR SALEMPUR, DEORIA-UTTAR PRADESH-274502

Fitness UpTo : 18-Jun-2036 Tax UpTo : One Time
 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	: AA2036874051	Rear HSRP No	: AA2037520398
Type of Body	: SOLO WITH PILLION	Month/Year of Manuf.	: 04/2021
No of Cylinders	: 1	Chassis No	: MBLJAW145MHD08331
Engine No	: JA06EWMHD11897	Fuel	: PETROL
Horse Power(BHP)	: 9.02	Cubic Capacity	: 113.20
Maker's Classification	: PASSION PRO(DRUM-SELF-Wheel base CAST) SE		: 1270
Seating Capacity	: 2	Standing Cap	: 0
Steeper Cap	: 0	Unladen Wt (kgs)	: 117
Colour	: PRIME RED	Laden/GV Wt (kgs)	: 247
Other Criter	:	AC Fitted	: NO
Vehicle Purchase As	: Fully Bull		

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

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

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

The motor vehicle above described is subject to Hypothecation in favour of HDB FINANCIAL SERVICES LTD, Deoria, Uttar Pradesh-274001 w.e.f. 18-Jun-2021.

Purchase dt	: 15-Jun-2021	Safe Amt	: 69975/-
OTT Date	: 15-Jun-2021	Amount/Rept No	: 6998 / UPS202100002701
Tax Up to	: One Time	Vehicle is Govt./ Pvt.	: PRIVATE
Tax Exempted or Not	: NOT EXEMPTED	Date of Approval	: 19-Jun-2021

Other State/Transfer/Conversion Details

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

This certificate is valid from 19-Jun-2021 to 18-Jun-2036

Date: 12-Jul-2021 12:14:55

Taxation Particulars / Advance Registration Mark Fee Details

ARTOHA
 Signature of Registration Authority
 DEORIA, 12-Jul-2021

230198



Package Offer

2025-08-22

Mr./Ms. Monu Kumar Gond

Vill Balua Gauri, Po Ropan Chhapra, Ps Lar Salempur, Deoria, Uttar Pradesh, 274502
, Uttar Pradesh, 274502

Dear Mr./Ms. Monu Kumar Gond,

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. Monu Kumar Gond, 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

GSTIN: 09AAPCM5877M1ZD



Please scan the QR for details.



ogram Proposal Two-Wheeler Package Contract - Bundled



IS/2025/7001/O/46575/463414

Private Limited

and Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India

at.

+91 79410 50643

Mail: 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	
Monu Kumar Gond	1992-07-20	9919968207	Ram Kalaph Gond	Hero Motocorp	PASSION	
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity	Vehicle Type
Passion Pro FI DRUM SELF CAST	UP52BL5517	JA06EWMHD11897	MBLJAW145MHD08331	2021	113	TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV	
34000.00	NA	0.00	0.00	0.00	34000.00	
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	1270.36	
Address			City / District	Pin Code	State	
Vill Balua Gauri, Po Ropan Chhapra, Ps Lar Salempur, Deoria, Uttar Pradesh, 274502				274502	Uttar Pradesh	
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
PRIYANKA DEVI	Female	27 Years	WIFE	2025-08-22 16:57	Midnight of 2026-08-21	

Section A, VRC: 580.33 TCR: 441.32 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST (A): 1021.65

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%) (B): 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: 210.77 AHDC, DOC & Additional External Tyre Cover (AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 37.94 Total with GST (D): 248.71

Total (Section A+B+C+D) Offered Price After Discount: 1270

Package Period Covered	2025-08-22 To 2026-08-21	2026-08-22 To 2027-08-21	2027-08-22 To 2028-08-21	2028-08-22 To 2029-08-21	2029-08-22 To 2030-08-21
ADV	34000	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 2026-06-14 (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 Companys 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.: 794105064/ 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 1270.36 ON 2025-08-22 from Mr./Ms. Monu Kumar Gond against the ARN No. INCP00463414

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, 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

आधार



Download Date: 23/01/2020


 मोनु कुमार गोंड
 Monu Kumar Gond
 जन्म तिथि/DOB: 20/07/1992
 यल्ल/ MALE

Issue Date: 16/01/2020

9264 6584 7195
 VID : 9132 8111 9350 5192


मेरा आधार, मेरी पहचान


भारतीय विविध पहचान प्राधिकरण,
Unique Identification Authority of India

आधार

Download Date: 23/01/2020

पता:
 C/O रामकलाप गोंड, बलुआ गौरी, रोपन प्रखण्ड, देवरिया,
 उत्तर प्रदेश - 274502

Address:
 C/O Ramkalah Gond, balua gauri, Ropan
 Chhapra, Deoria,
 Uttar Pradesh - 274502


Issue Date: 16/01/2020

9264 6584 7195
 VID : 9132 8111 9350 5192

1047 | help@uidai.gov.in | www.uidai.gov.in

आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार

GOVT. OF INDIA

MONU KUMAR GOND

RAMKALPH GOND

20/07/1992

Permanent Account Number

BCBPG8044E

मोनु कुमार


Signature



05/10/2013

UNION OF INDIA Driving Licence (UP) (NT)

UP52 20140007115


 जारी करने की तिथि / Date of issue: 28/05/2014
 वैधता / Validity: 27/05/2034
 नाम / Name: GOVIND KUMAR GOND
 जन्म तिथि / Date of Birth: 01/07/1989
 पंजीकृत समूह / Registered Group: Unknown
 पिता/पति का नाम / Son/Daughter/Wife of: RAM VILASH GOND



UP52 20140007115

UP01227046MT

 LMV 28/05/2014
 M.V.C 28/05/2014

पता / Address: PURANI MISHRA
 KHUKHUNDU
 DEORIA -

Govind
 Holder's Signature


 जारी करने वाली प्राधिकारिता / Issuing Authority Sign: DEORIA

Form 7 (R) de 16/21

GANPATI AUTOMOBILES

Purwa Chauraha, Deoria

Mob. ~~9415389588~~ ~~9336581168~~ 7749205588

ESTIMATE

Owner's Name Manu Kumar Gansh

Address Deoria

Phone 9517139361

Job No.

Date 30.11.20

Chasis No.

Engine No.

Key No.

Regn. No. UP52-BL-5517

Speedmeter Redg.

Insurance No.

Model Peugeot P10

Dear Sir,

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				Rs.	P.
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3	Wind Screen	15	390	3900	
4	Cream	18	200	2000	
5	f. fender	15	1400	14000	
6	Tank Sarnel - (L)	10	755	7550	
7	Tank Sarnel - Inner (L)	15	823	12345	
8	Fuel Tank	10	8808	88080	
9	Handle	10	500	5000	
10	f. Winden (L)	11	250	2500	
11	Sand guard	10	800	8000	
12	f. fender - Complete - L/R	20	2500	50000	
13	Mirror - (L)	10	150	1500	
14	Line - (L)	10	100	1000	
15	T/L	10	650	6500	
16	f. fender - 1/2			12550	
17					
18					
19					
20					
21	Labour			600	
22					
23					
24					
25					
TOTAL				21280	

- 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

For **Ganpati Automobiles**
 Gorakhpur Road
 OPP. Dr. G. N.
 DEORIA
 7740027
 Authorised Signatory