

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.

ESTIMATE

06-02-2026
 6306681615
 SPLENDOR +
 UP31BZ1645
 Platinum

Estimate No. 10730-03-REST-0226-850
 Customer Name MOHD. AQIB AKRAM
 VIN MBLHAW129PHBA3320
 Insurance Company
 HMCGL Card No 1073022890010451

Date
 Contact No.
 Model
 Reg No.
 HMCGL Card Category

S No	Part Number	HSN No.	Billing Type	Rate	Qty	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount
												1,336.00
1	61000AAE200RS -FRONT FENDER NH-1	87141090	Paid	1,132.20	1	9.00	9.00	0.00	0.00	0.00	0.00	1,106.00
2	83410KWHHY0S -FR VISOR	87141090	Paid	937.29	1	9.00	9.00	0.00	0.00	0.00	0.00	220.00
3	33450KCC710S -WINKER ASSY L FR	85122010	Paid	186.44	1	9.00	9.00	0.00	0.00	0.00	0.00	622.00
4	50803KST940S -GUARD LEG	87141090	Paid	527.12	1	9.00	9.00	0.00	0.00	0.00	0.00	225.00
5	K50506KCCA900RS -KIT STEP	87141090	Paid	190.68	1	9.00	9.00	0.00	0.00	0.00	0.00	751.00
6	83600KCC830ZBS -L SIDE COVER (BLACK NH-1)	87141090	Paid	636.44	1	9.00	9.00	0.00	0.00	0.00	0.00	220.00
7	33650KCC710S -WINKER ASSY L RR	85122010	Paid	186.44	1	9.00	9.00	0.00	0.00	0.00	0.00	5,900.00
8	17500AAEH00ZBS -FUEL TANK-BLACK (NH-1 (TYPE-2))	87141090	Paid	5,000.00	1	9.00	9.00	0.00	0.00	0.00	0.00	460.00
9	53100AAE110S -PIPE STRG HANDLE	87141090	Paid	389.83	1	9.00	9.00	0.00	0.00	0.00	0.00	857.00
10	53200KCC690S -STEM COMP STRG	87141090	Paid	726.27	1	9.00	9.00	0.00	0.00	0.00	0.00	2,028.00
11	51410KTC901S -PIPE COMP.FR.FORK	87141090	Paid	859.32	2	9.00	9.00	0.00	0.00	0.00	0.00	460.00
12	77300ADH700CS -REAR COWL RIGHT NH303M	87141090	Paid	389.83	1	9.00	9.00	0.00	0.00	0.00	0.00	460.00
13	77400ADH700CS -REAR COWL LEFT NH303M	87141090	Paid	389.83	1	9.00	9.00	0.00	0.00	0.00	0.00	239.00
14	77235AAE300RS -CENTER REAR COWL NH-1 TYPE-1	87141090	Paid	202.54	1	9.00	9.00	0.00	0.00	0.00	0.00	940.00
15	80100AAE300S -FENDER COMPLETE REAR	87141090	Paid	796.61	1	9.00	9.00	0.00	0.00	0.00	0.00	751.00
16	83600KCC830ZBS -L SIDE COVER (BLACK NH-1)	87141090	Paid	636.44	1	9.00	9.00	0.00	0.00	0.00	0.00	751.00
Parts Total											0.00	16,575.00

Labour Details

S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount	
1	102032 - ACCIDENTAL LABOUR-SPLENDOR +	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 16,575.00
 Labour Total 2,000.10
 SGST (Parts) 9% 1,264.19
 CGST (Parts) 9% 1,264.19

CGST (Labour) 9%

152.55

Total

18,575.10

Rupees in Words: Eighteen Thousand Five Hundred Seventy Five and paise Ten Only words: Eighteen Thousand Five Hundred Seventy Five and paise Ten Only **Authorised Signatory**

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.

10730 - Main W/S

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.	श्री० आकिव अकरम. 6306681614.
2	Vehicle No. / वाहन संख्या	UP31BZ 1645
3	Policy No. / पालिसी संख्या	MS/2025/7001/0/46575/413332
4	Period of Insurance / बीमा अवधि	05/03/2025 से 04/03/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	03/02/2026 10:00am.
6	Place of Accident / दुर्घटना का स्थान	अटकोहना के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	श्री० आकिव अकरम. 6306681614 UP31 20240000203
8	Estimated Loss / अनुमानित हानि	
09.	Cause of Accident / दुर्घटना का कारण : अटकोहना के पास सामने से मोटरसाइकिल से टक्कर हो गई कि तभी अचानक पीछे आ रही मोटरसाइकिल वाले ने पीछे से टक्कर मार दी जिससे मेरी गाड़ी बाँयी ओर गिरकर सातिलुस्त 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.	MOSARRAM AUTO SALES, LRPR ROAD LAKHIMPUR-KHERI, 9151154036

Date / दिनांक : 05/02/2026
हस्ताक्षर

श्री० आकिव अकरम
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. MS/2025/7001/0/46575/

Tel. No.

Period of Insurance 05/03/2025 से 04/03/2026
 Claim No. 413332

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 : MOHD. AQIB AKRAM
 (b) Address for correspondence : R/O GOTRIYYA BAG, LAKHIMPUR-KHERI, PS-KOTWAL
 (c) Telephone : 6306681614. UTTAR PRADESH, 262701.

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2023</u>	Engine No. <u>HAFJEDPPHB 73930</u> Chassis No. <u>MBLHANJ29PHBA3320</u>	Registration No. <u>UP31BZ</u> <u>1645</u>
---	--	--

- (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?
 (h) Number of passengers carried
 (i) Number of Passenger permitted

.....

N/A

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : MOHD AQIB AKRAM.
 (b) Age : 22/09/2000
 (c) Address : GOTATIYA BAG, LAKHIMPUR-KHERI, UP, 226270
 (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 : UP31 20240000203
 (h) Issuing Authority : 18/01/2024
 (i) Date of Expiry : 21/09/2040
 (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 : 03/02/2026 10:00 AM.
 (b) Place : अल्कोहना के पास
 (c) Speed of vehicle at the time of accident : 30-40 km/h.
 (d) Give a short description of the accident : अल्कोहना के पास समने से मोटरसाइकिल से टक्कर
 (e) If any third party was responsible for this accident give the name and address : हो गई 7 के तभी अचानक पीछे आरहे मोटरसाइकिल वाले ने पीछे से टक्कर मार दी जिससे मेरी गाड़ी बायां ओर गिर कर सतिगस्त हो गई।

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 SALES, LRP 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 :
 (e) Full details of property damaged :
 (f) Has notice of any claim been given to you? : WIA

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 Policy 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 05/02/ 2006

Signature of the insured श्री. आशिष अकरम

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. CIP31B2 1645 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 प्रो. आर्किव अकरम
Occupation
Address

Bank Account Number
Name of the Bank



GOVERNMENT OF UTTAR PRADESH

Transport Department LAKHIMPUR KHERI

FORM 23

CERTIFICATE OF REGISTRATION

Registration No : UP31BZ1645 Registration Date : 26-Feb-2023
 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 : MOHD. AQIB AKRAM Son/wife/daughter of : S/O SRI MOHD AKRAM
 Full Address: (Permanent) : R/O GOTAIYYABAG, LAKHIMPUR KHERI, PS-KOTWALI, KHERI, UTTAR PRADESH-262701
 Full Address: (Temporary) : R/O GOTAIYYABAG, LAKHIMPUR KHERI, PS-KOTWALI, KHERI-UTTAR PRADESH-262701
 Fitness UpTo : 25-Feb-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 : AA2071862604 Rear HSRP No : AA2068845052
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 02/2023
 No of Cylinders : 1 Chassis No : MBLHAW129PHBA3320
 Engine No : HA11EDPHB73910 Fuel : PETROL
 Horse Power(BHP) : 7.91 Cubic Capacity : 97.20
 Maker's Classification : SPLENDOR+ BLACK AND A Wheel base : 1236
 CCENTSS
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleepar Cap : 0 Unladen Wt (kgs) : 112
 Colour : BLACK AND ACCENT Laden/GV Wt (kgs) : 242
 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 : 23-Feb-2023 Sale Amt : 73336/-
 OTT Date : 23-Feb-2023 Amount/Rcpt No : 7334 / UP31D23020003517
 Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
 Date of Approval : 27-Feb-2023

Other State/Transfer/Conversion Details

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

This certificate is valid from 26-Feb-2023 to 25-Feb-2038

Date : 15-Mar-2023 15:36:55

Taxation Particulars / Advance Registration Mark Fee Details:

पंजीयन अधिकारी
मोटर वाहन विभाग
लखीमपुर-खीरी
 Signature of Registering Authority
 Date 15-Mar 2023

P 1532085

Program Proposal Two-Wheeler Package Contract - Bundled



Package Contract No.: MS/2025/7001/O/46575/413332

Motorsathi Care Private Limited
 B Dass 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	
MOHD. AQIB AKRAM	2000-09-22	8423202517	SRI MOHD AKRAM	Hero Motocorp	SPLENDOR PLUS	
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity	Vehicle Type
I3S ALL BLACK E20	UP31BZ1645	HA11EDPHB73910	MBLHAW129PHBA3320	2023	100	TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV	
50500.00	NA	0.00	0.00	0.00	50500.00	
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	1992.37	
Address			City / District	Pin Code	State	
R/O GOTAIYYABAG, LAKHIMPUR KHERI, PS-KOTWALI, Kheri, Uttar Pradesh, 262701				262701	Uttar Pradesh	
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
SHABNAM KHAN	Female	44 Years	MOTHER	2025-03-05 13:37	Midnight of 2026-03-04	

Section A, VRC: 709.84 TCR: 357.54 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST(A) 1067.38

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): 374.58 MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @9% + SGST @9%): 67.42 Total MS Services with GST(C): 442.00

Section D, Drive Assure: 409.31 AHDC, DOC & Additional External Tyre Cover(AFTC): Alloy wheel Cover Other Discount: 0.00 GST (CGST @9% + SGST @9%): 73.68 Total with GST(D): 482.99

Total(Section A+B+C+D) Offered Price After Discount: 1992

Package Period Covered	2025-03-05 To 2026-03-04	2026-03-05 To 2027-03-04	2027-03-05 To 2028-03-04	2028-03-05 To 2029-03-04	2029-03-05 To 2030-03-04
ADV	50500	NIL	NIL	NIL	NIL
MS Services Period Covered (NODL)	1 Year	NIL	NIL	NIL	NIL

*THE VEHICLE COVERED IN THIS CONTRACT HAVE A VALID IP COVERAGE TAKEN FROM AN INSURANCE COMPANY VALID UPTO 2028-02-22 (DETAILS ARE 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 Company's accountability in respect of any one request or series of requests arising out of one event: Up to Rs - 100000/- 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 to 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 1992.37 ON 2025-03-05 from Mr./Ms. MOHD. AQIB AKRAM against the ARN No. INCP00413332

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 - 23, 16, 18

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

Indian Union Driving Licence
Issued by Uttar Pradesh

UP31 20240000203

Issue Date: 18-01-2024 Validity (NT): 21-09-2040 Validity (TR): _____

MOHD. AQIB AKRAM
 Date of Birth: 22-09-2000 Blood Group: _____
 Son/Daughter/Wife of: **MOHD AKRAM** Organ Donor: **N**

Address: **gotaiyya bag Lakhimpur Kheri Uttar Pradesh 262701**

Date of First Issue: 18-01-2024

DL No: UP31 20240000203

UPDL 000012598352



Invalid Carriage (Regn Numbers)^a

Hazardous Validity^d Hill Validity^e

Class of Vehicle	Code	Issued By	Date of Issue	Vehicle Category	Badge Number ^c	Badge Issued Date ^c	Badge Issued By ^c
	MCWG	UP31	18-01-2024	NT			
	LMV	UP31	18-01-2024	NT			
	MVSD						

Emergency Contact Number

Pankaj
 Licensing Authority
 UP31 LAKHIMPUR KHERI

Form 7 Rule 16(2)

भारत सरकार
Government of India

मो. मोहम्मद अक़रम
Mohd. Aqib Akram
जन्म तिथि/DOB: 22/09/2000
पुरुष/ MALE

9145 7781 6537
VID : 9181 3805 2132 2125

मेरा आधार, मेरी पहचान


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
मो. अक़रम, मोटैया बाग, लखीमपुर, खैरी,
उत्तर प्रदेश - 262701


Address:
C/O: Mohd Akram, gotaiyya bag, Lakhimpur,
Kheri,
Uttar Pradesh - 262701

9145 7781 6537
VID : 9181 3805 2132 2125

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

आयकर विभाग  **भारत सरकार**
INCOME TAX DEPARTMENT **GOVT. OF INDIA**

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card




नाम / Name
MOHD AQIB AKRAM

पिता का नाम / Father's Name
MOHD AKRAM

कार्ड की तारीख / Issue Date
22/09/2000

ECZPA1619E



हस्ताक्षर / Signature **24588**

In case this card is lost / found, kindly inform / return to :

Income Tax PAN Services Unit, UTITSL,
Plot No. 3, Sector 11, CBD Belapur,
New Mumbai - 400 614.

यस कार्ड के खोने/पाने पर कृपया सूचित करें/वापस करें :
आयकर पैन सेवा यूनिट, UTITSL
प्लॉट नं: 3, सेक्टर 11, सी.बी.डी. बेलपुर,
नवी मुंबई-400 614.

Aaykar Sampark Kendra
For Income Tax Related
Queries call Toll Free No.
1801
or
1800 100 1001