

GANPATI AUTOMOBILES

Purwa Chauraha, Deoria

Mob. - 9415383538, 9306531183

7794004713, 7804800538

Owner's Name: **JITENDAR KUMAR CHAUDHARY**

Address: **DEORIA**

Phone: **7558235642**

ESTIMATE

Job No.
 Date... **07/02/2026**
 Chasis No.
 Engine No.
 Key No. **UP52BF6658**
 Regn. No. **UP52BF6658**
 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	Vibor -	1K	1100	1100	
2	HIL	1S	525	525	
3	F-Fordae -	1K	1500	1500	
4	F-Linkae - (C)	1K	250	250	
5	Fyed Tank.	1K	5531	5531	
6	Seat. Coverd. L&R.	2R	1000	2000	
7	Cemtar -	1K	250	250	
8	R.R. Linkae - L	1S	250	250	
9	Handlg -	1K	500	500	
10	Livary - (L)	1K	100	100	
11	TIL	1K	560	560	
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
TOTAL				12106	

- 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 Automobiles
 For - Ganpati Automobiles
 OPP. DEORIA
 DEORIA
 Mob. 7794004713

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.	JITENDAR KUMAR CHAKRABORTY 7558235642
2	Vehicle No. / वाहन संख्या	UP52BF6658.
3	Policy No. / पालिसी संख्या	ms/2025/7001/01465751457791
4	Period of Insurance / बीमा अवधि	24/07/2025 - To - 23/07/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	03/02/2026 Time:- 2:30pm.
6	Place of Accident / दुर्घटना का स्थान	हाटा रोड
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	JITENDAR KUMAR CHAKRABORTY UP5220080053560, 7558235642
8	Estimated Loss / अनुमानित हानि	
9	Cause of Accident / दुर्घटना का कारण :	देवीया से क्लान जेज जाते समय हाटा से 2 किलोमीटर आगे रोड पर छोड़ा रोड क्रस कर दिया ड्राइवर से गिरावे गरी गाड़ी टकरा गई। गिरावे गरी गाड़ी कापे क्षति गीट कर अतिशय 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 / फ़ोन नं.	GANPATI AUR. MOBILE DEORIA.

Date / दिनांक : 6/02/26
हस्ताक्षर

जितेंद्र चौरसिया

Signature of Insured / बीमाधारक के

जितेंद्र चौरसिया





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/2025/7001/0/46575/957791

Tel No. _____

Period of Insurance 29/12/25 - JB - 23/07/2026
 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 JITENDRA KUMAR CHALURASIVA
 (b) Address for correspondence NISHAPURA GEORGA
 (c) Telephone _____

2 THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2020</u>	Engine No. <u>61850</u> Chassis No. <u>02222</u>	Registration No. <u>UP52 BF</u> <u>6658</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 : JITENDRA KUMAR CHAUHAN
 (b) Age : 02/02/1990
 (c) Address : VISHAMPUR KALA DEORIA (C.P.)
 (d) Is the Driver
 1. Owner : YES
 2. paid driver?
 3. Owner's relative or friend? : OLDER
 (e) If paid driver, how long has he been in your employment : N/A
 (f) Was he under the influence of intoxication Liquor or drugs? : N/A
 (g) Driving Licence Number : UP5220080053560
 (h) Issuing Authority :
 (i) Date of Expiry : 27/05/2028
 (j) Was the licence temporary/permanent : PERMANENT
 (k) Details of endorsement/suspension, if any : N/A
 (l) Has he been involved in any accident before? : N/A
 (m) Has he been charged by the policy? If so, Why? : N/A

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 Time: 2:30 PM
 (b) Place : देवरा के करीब जहाँ खगल हाटा है
 (c) Speed of vehicle at the time of accident : 20-30 km/hr
 (d) Give a short description of the accident : गाड़ी का ब्रेक फेल हो गया और गाड़ी घुमाव में जाकर हाटा में जा गिरा
 (e) If any third party was responsible for this accident give the name and address : हाटा गाड़ी का ड्राइवर

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 : 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? : N/A

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 6/02/26 200

Signature of the insured जितेंद्र-भारसिमा

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
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank



GOVERNMENT OF UTTAR PRADESH

Transport Department DEORIA

FORM 23

CERTIFICATE OF REGISTRATION

Registration No : UP52BF6658 Registration Date : 14-Jul-2020
Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : HPT
Dealer's Name & Address : GANPATI AUTOMOBILES (D), PURWA CHAURAHA GKP ROAD, DEORIA, ., 190-274001
Owner Name : JITENDRA KUMAR Son/wife/daughter of : RAM GIRISH CHAURASIYA
CHAURASIYA
Full Address: (Permanent) : VILL-VISHUNPUR, PO-BHIKHAMPUR ROAD, PS-KOTWALI, DEORIA, UTTAR PRADESH-274001
Full Address: (Temporary) : VILL-VISHUNPUR, PO-BHIKHAMPUR ROAD, PS-KOTWALI, DEORIA-UTTAR PRADESH-274001
Fitness UpTo : 13-Jul-2035 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 : AA2014737917 Rear HSRP No : AA2014286740
Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 07/2020
No of Cylinders : 1 Chassis No : MBLHAW119LHG02222
Engine No : HA11EVLHG01850 Fuel : PETROL
Horse Power(BHP) : 7.91 Cubic Capacity : 97.20
Maker's Classification : SPLENDOR + (SELF-DRUM- Wheel base : 1236
CAST)
Seating Cap(in all) : 2 Standing Cap : 0
Sleepar Cap : 0 Unladen Wt (kgs) : 111
Colour : BLACK-SILVER STR Laden/GV Wt (kgs) : 241
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 : 10-Jul-2020 Sale Amt : 62565/-
OTT Date : 10-Jul-2020 Amount/Rcpt No : 6257 / UP52D20070000987
Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
Date of Approval : 14-Jul-2020
Other State/Transfer/Conversion/Reassign Details
Previous Owner : Previous RegNo
Old State : Entry Date
Transfer Date : Conversion Date

This certificate is valid from 14-Jul-2020 to 13-Jul-2035

Date : 08-Aug-2025 15:50:51

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Licensing Authority
Date : 08-Aug-2025

Q 1352600



Package Offer

2025-07-24

Mr./Ms. JITENDRA KUMAR CHAURASIYA

Vill-Vishunpur, Po-Bhikhampur Road, Ps-Kotwali, Deoria-
, Uttar Pradesh, 274001

Dear Mr./Ms. JITENDRA KUMAR CHAURASIYA,

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. JITENDRA KUMAR CHAURASIYA, 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

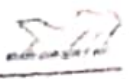
GSTIN: 09AAPCM5877M1ZD



Please scan the QR for details.



Insurance Proposal Two-Wheeler Package Contract - Bundled



MS/2025/7001/O/46575/457791

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

10 50643
 @motorsathi.com
 help section of www.motorsathi.com

Name of Certificate Holder	Date of Birth	Mobile No.	Father/Husband Name	Make	Model
JITENDRA KUMAR CHAURASIYA	1990-02-02	7558235642	Ram Girsh Chaurasiya	Hero MotoCorp	SPLENDOR PLUS
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity Vehicle T
DRUM SELF E20	UP52BF6658	HA11EVLHIG01850	MBLJHAW119LHIG02222	2020-07-14	100 TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV
24500.00	NA	0.00	0.00	0.00	24500.00
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Offered Payment (Incl. G
	Solo			2	18,9.05
Address			City / District	Pin Code	State
Vill-Vishampur, Po-Bhikhampur Road, Po-Kotwali, Deoria-				274001	Uttar Pradesh
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
SUMAN CHAURASIYA	Female	31 Years	WIFE	2025-07-24 13:23	Midnight of 2026-07-

Section A, VRC: 442.77 TCR: 0.00 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%) 0.00 Total with GST(A): 442.77

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): 134.12

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: 160.81 AHDC, DOC & Additional External Tyre Cover(AFTC) Other Discount: 0.00 GST (CGST @9% + SGST @9%): 28.95 Total with GST(D): 189.76

Total(Section A+B+C+D) Offered Price After Discount: 1819

Package Period Covered	2025-07-24 To 2026-07-23	2026-07-24 To 2027-07-23	2027-07-24 To 2028-07-23	2028-07-24 To 2029-07-23	2029-07-24 To 2030-07-23
ADV	24500	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 2025-07-24 until 2026-07-23.

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 in Organized Racing c) Pace Making d) Speed Testing e) 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 it 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 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 - 100 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 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 person 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.: 1800-100-1000 email id: info@motorsathi.com

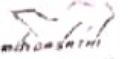


IMPORTANT NOTICE: The coverage is not indemnified if the vehicle is used or driven otherwise than in accordance with this Schedule. Any payment by the company by reason of wider terms appearing in the Certificate. All disputes arising out of or in connection with this agreement shall be subject to the exclusive jurisdiction of the courts at Aligarh.

Received with Thanks Rs 1819.05 ON 2025-07-24 from Mr./Ms. JITENDRA KUMAR CHAURASIYA against the ARN No. INCP00457791
 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: 1MT - 22, 16, 18
 Customer Service Address: B.Dass Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India

Proposal Two-Wheeler Package Contract - Bundled



MS/20257001/03/46575/457791

Private Limited
 Post: DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India

050643
 www.motorsathi.com
 help section of www.motorsathi.com

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DRUM SELF E20	UP52RF6658	HA11EVLJIG01850	MBLHAW1191HG02222	2020-07-14	100
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Vehicle Type
24500.00	NA	0.00	0.00	0.00	TW
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Total ADV
	Solo			2	24500.00
Address			City / District	Pin Code	Offered Payment (Incl. GST)
Vill-Vishanpur, Po-Bhikhampur Road, Po-Kotwali, Deoria-				274001	1819.05
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
SUMAN CHAURASIYA	Female	31 Years	WIFE	2025-07-24 13:23	Midnight of 2026-07-

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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

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Total(Section A+B+C+D) Offered Price After Discount: 1819

Package Period Covered	2025-07-24 To 2026-07-23	2026-07-24 To 2027-07-23	2027-07-24 To 2028-07-23	2028-07-24 To 2029-07-23	2029-07-24 To 2030-07-23
ADV	24500	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 2025-07-24 until 2026-07-23.

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 use) 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 it 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 5 of 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.

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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

आयकर विभाग
INCOME TAX DEPARTMENT

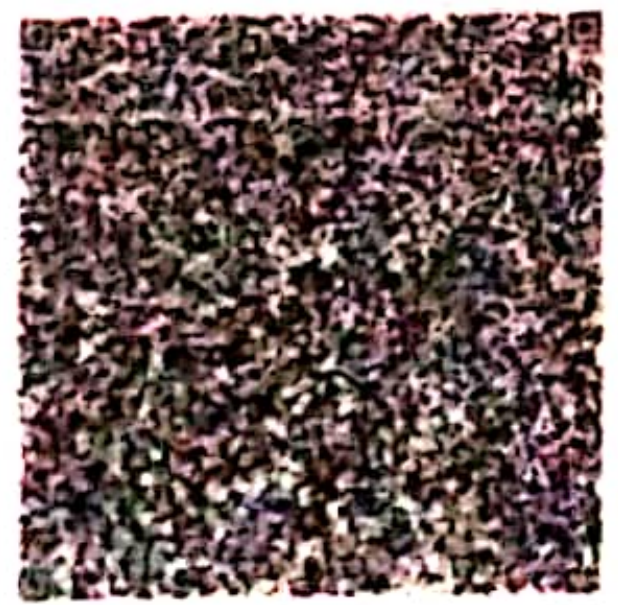


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

BIKPC5143F



नाम / Name
JITENDRA CHAURASIYA

पिता का नाम / Father's Name
RANGIRISH CHAURASIYA

08022021

जन्म की तारीख /
Date of Birth
02/02/1990

जितेंद्र चौरसिया
हस्ताक्षर / Signature

भारत सरकार
Government of India

जीतेन्द्र चौरसिया
Jitendra Chaurasiya

जन्म तिथि / DOB : 02/02/1990

पुरुष / Male

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या वयूआर कोड/
ऑफ़लाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए।
Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication or scanning of QR code / offline XML).

7617 2156 7079

मेरा आधार, मेरी पहचान

Aadhaar No. Issued: 25/06/2016



भारतीय विशिष्ट पहचान अधिकरण
Unique Identification Authority of India

पता: दवारा: रामगीरीश चौरसिया, विशुनपुर कला,
पोस्ट भोखमपुर, बिशुनपुर कला, देवरिया, उत्तर
प्रदेश, 274405
Address: C/O: Ramgirish Chaurasiya,
Vishunpur Kala, Post Bhikhampur, Bishunpur
Kala, Bhikhampura, Deoria, Uttar Pradesh,
274405

7617 2156 7079

1947 help@uidai.gov.in www.uidai.gov.in

Details as on 01/07/2024





**Indian Union Driving Licence
Issued by Uttar Pradesh**



UP52 20080053560

Issue Date Validity (NT) Validity(TR)*
29-07-2025 27-05-2028 28-07-2030



Holder's Signature

Date of First Issue 28-05-2008

Name:

JITENDRA KUMAR CHAURASIYA

Date of Birth: 02-02-1990

Blood Group:

Organ Donor: N

Son/Daughter/Wife of:

RAM GIRISH CHAURASIYA

Address:

**VISHUNPUR KALA BHIKHANPURA
DEORIA 274405**

DL No: UP52 20080053560

UPDL521000024911



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	28-05-2008	NT			
	LMV	UP52	28-05-2008	NT			
	TRANS	UP52	29-06-2010	TR			
	MVSD						

Emergency Contact Number

Licensing Authority
UP52 DEORIA