

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

Estimate No.	10730-03-REST-0226-860	Date	13-02-2026
Customer Name	BRIJNANDAN KUMAR	Contact No.	9839805410
VIN	MBLJAW181MGA01781	Model	SUPER SPLENDOR
Insurance Company		Reg No.	UP31BP5554
HMCGL Card No	1073023820004023	HMCGL Card Category	Diamond

S No	Part Number	HSN No.	Billing Type	Rate	Qty	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount
1	17520AAGA00RS -FUEL TANK BLACK NH 1	87141090	Paid	7,761.02	1	9.00	9.00	0.00	0.00	0.00	0.00	9,158.00
2	50803KTC900S -GUARD LEG	87141090	Paid	573.73	1	9.00	9.00	0.00	0.00	0.00	0.00	677.00
3	53100AAGA00S -PIPE STRG HANDLE	87141090	Paid	429.66	1	9.00	9.00	0.00	0.00	0.00	0.00	507.00
4	37100KTCA21S -METER ASSY COMB	87141090	Paid	1,515.25	1	9.00	9.00	0.00	0.00	0.00	0.00	1,788.00
5	88120AANH01ZAS - MIRROR ASSEMBLY LEFT BACK(BLACK NH-1)	70091090	Paid	203.39	1	9.00	9.00	0.00	0.00	0.00	0.00	240.00
Parts Total											0.00	12,370.00

Labour Details

S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount	
1	102032 - ACCIDENTAL LABOUR-SUPER 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	12,370.00
Labour Total	2,000.10
SGST (Parts) 9%	943.47
CGST (Parts) 9%	943.47
SGST (Labour) 9%	152.55
CGST (Labour) 9%	152.55
Total	14,370.10

Rupees in Words: Fourteen Thousand Three Hundred Seventy 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 इंश्योरेंस 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.	वृजन्मन् कुमार. 9839805410
2	Vehicle No. / वाहन संख्या	UP 31 BP 5554
3	Policy No. / पालिसी संख्या	MS/2025/7001/0/46575/412302.
4	Period of Insurance / बीमा अवधि	03/03/2025 से 02/03/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	09/02/2026 8:00PM.
6	Place of Accident / दुर्घटना का स्थान	परसिया गाँव के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	वृजन्मन् कुमार. 9839805410 UP 31 2018 000 8525
8	Estimated Loss / अनुमानित हानि	
09.	Cause of Accident / दुर्घटना का कारण :	परीक्षण चमक के पास सामने से साइड से आया जिससे मुझे ब्रेक लगाना पड़ा जिससे मेरी गाड़ी अनियंत्रित होकर बायीं ओर गिरकर क्षतिग्रस्त हो गयी।
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.	MOSARAM AUTO SALES, LRP ROAD LAKHIMPUR-KHERI, 9151154036

Date / दिनांक : 10/02/2026
हस्ताक्षर

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 03/03/2025 से 02/03/2026 ⁴¹²³⁰²
 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 : BRIJNANDAN KUMAR
 (b) Address for correspondence : ROVILL- PARSIYA ROAD, POLAKHUN, P.S-ISKANAGAR,
 (c) Telephone : 9839 805410 KHERI, UP 262722.

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2021</u>	Engine No. <u>JA07ABMG A05891</u> Chassis No. <u>MBLJRWJ81MG A01781</u>	Registration No. <u>UP31BP</u> <u>5554</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?
 (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 : N/A
 (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 : BRIJNANDAN KUMAR
- (b) Age : 25/06/1987
- (c) Address : VILL-PARSITYA PO-LAKHUN, DHAURAHRA, KHERI, UP- 202722
- (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 20180008525
- (h) Issuing Authority : 24/07/2018
- (i) Date of Expiry : 24/06/2037
- (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: other insurance Policies indemnifying you in

5. DETAILS OF ACCIDENT

- (a) Date and Time : 09/02/2026 8:00PM
- (b) Place : परासिया गांव के पास
- (c) Speed of vehicle at the time of accident : 30-40 km/h
- (d) Give a short description of the accident : परासिया गांव के पास सामने साइड से कुला आया जिससे मुझे ब्रेक लगाना पडा जिससे मेरी गाडी आनिधायन होकर
- (e) If any third party was responsible for this accident give the name and address : वाराणसी मोर पोस्ट गांव में ही गड

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : FRONT AND LEFT
- (b) Estimated cost of repairs : MOSARRAM AUTO SALES, LRPRROAD
- (c) When and where can the damaged vehicle be inspected : LAKHIMPUR- KHERI 9154454036

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? : 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? : N/A
- (f) Has theft been reported to Police? : _____
- (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 10/02/2006

Signature of the insured [Signature]

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. UP31BP5554 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 arising directly/indirectly

Rs. _____

One Rupee
Revenue Stamp
When Amount
Exceeds Rs. 5000/-



Witness
Name
Signature
Address

Signature [Handwritten Signature]
Occupation
Address

Bank Account Number
Name of the Bank

Program Proposal Two-Wheeler Package Contract - Bundled

Package Contract No. MS-2024-001/0468/24-12302

Motorsathi Care Private Limited

B, Dass Compound Opposite DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Uttar Pradesh, 201001, India

Contact us at
Phone: 91 79410 50943

Email: info@motorsathi.com

Visit the help section of www.motorsathi.com

Name of Certificate Holder	Date of Birth	Mable No.	Father/Husband Name	Make	Model
BRIJNANDAN KUMAR	1987.06.25	9819809410	SRI BINDPA PRASAD	Hero Motocorp	SUPER SPLENDOR
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity Vehicle Type
DRUM SELF CAST F20	UP31BP5554	JA07ABMGA05891	MBLJAW181MGA01781	2022	125 75
Asset Declared Value (ADV)	Site Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV
47000.00	NA	0.00	0.00	0.00	47000.00
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Offered Payment Mode
NA	NA	HP/Lease/Hire-Purchase Agreement	HP/Lease/Hire-Purchase	2	UPI/Insta
Address			City / District	Pin Code	State
VILL-PARSIYA PO- LAKHUN, VILL- PARSIIYA PO- LAKHUN, PS- ISANAGAR, Kheri, Uttar Pradesh, 202722			Aligarh	202722	Uttar Pradesh
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
BANDANA DEVI	Female	35 Years	WIFE	2025-03-03 17:38	Midnight of 2026-03-03
Section A: VRC: 723.87 TCR: 554.00 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (20%): 179.77 Total with GST(A): 1098.40					
Section B: EC: 0.00 EC Service: 0.00 B. PD: 0.00 Sub Total: 0.00 FAC: 0.00 ENC: 0.00 TDC: 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(D): 3.14 + MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @ 9% + SGST @ 9%): 61.42 Total MS Services with GST(C): 442.00					
Section D: Drive Assist: 333.35 AHDP: 1000 & Additional External Tyre Cover(AETC): Personal Accident Cover for Pillion Rider, Other Discount: 0.00 GST (CGST @ 9% + SGST @ 9%)(D): 59.99 Total with GST(D): 293.29					
Total Section A + B + C + D - Offered Price After Discount: 1934					
Package Period Covered	2025-03-03 To 2026-03-02	2026-03-03 To 2027-03-02	2027-03-03 To 2028-03-02	2028-03-03 To 2029-03-02	2029-03-03 To 2030-03-02
ADV	47000	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 UP TO 2026-02-01-06/07/24 AND 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 effects) 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 driving or obtaining such a license. Provided also that the person holding an effective Indian License may also drive the vehicle and that such a person satisfies the requirements of Rule 23 Central Motor Vehicle Rules, 1989.

LIMIT OF ACCOUNTABILITY: Limit of the amount of the Company's accountability in respect of any one incident or series of incidents arising out of one event UPI or Rs. 1,00,00,000. The amount mentioned is estimated to help. Actual Limit on Terms & Conditions are in package document which can be downloaded only via authorized portal www.motorsathi.com Motorsathi App.

DISCLAIMER: The package shall be cancelled or void in the event of Cheque Dishonour. The company may cancel the package by sending 7 days notice in case of misrepresentation, non-disclosure of material facts or non-compliance of the coverage.

ANTI MONEY LAUNDERING CLAUSE: In the event of a request under the package exceeding Rs 1 lakh or a request for virtual payment exceeding Rs 1 lakh, the account holder comply with the provisions of KYC policies of the company. The MSPL package is available in all our operating offices as well as our company website.

TO REGISTER REQUEST PLEASE CONNECT WITH MOTORSATHI CARE PVT LTD AT: Website: www.motorsathi.com Customer Care / Toll Free Phone No. 79410 50943 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 water damage appearing in the Certificate. All disputes arising out of or in connection with this agreement shall be subject to the jurisdiction of the court at Aligarh.



Received with Thanks Rs 1933.69 ON 2025-03-02 from Mr./Ms. BRIJNANDAN KUMAR against the ARN No. INC-P00412302. The acknowledgement is subject to a compulsory excess of Rs 100/- & Depreciation is applicable as per terms & conditions* (Please see overleaf for details) Consolidated Stamp Duty Paid (endorsements IM) - 21, 16, 15. Customer Service Address: B, Dass Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh.

Brijnandan Kumar

MOSARAM AUTO SALES

L.R.P.ROAD, LAKHIMPUR KHERI, LAKHIMPUR, KHERI, 262701, UP, INDIA

State Code: 9 Contact: 7800009643, 7408404715, 7408404714, 7800009644

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#HeroMotocorp can further contact you via Call, SMS or email for feedback or to give information about New launches.

10730 - Main W/S



Transport Department Lakhimpur Kheri
FORM 23

CERTIFICATE OF REGISTRATION

Registration No : UP31BP5554
Description of Vehicle : M-CYCLE/SCOOTER
Dealer's Name & Address : MUSA RAM AUTO SALES, L R P ROAD, LAKHIMPUR KHERI, ...
Owner Name : BRIJNANDAN KUMAR
Full Address: (Permanent) : VILL-PARSIYA PO- LAKHUN, VILL-PARSIYA PO- LAKHUN, PS- ISANAGAR, KHERI, UTTAR PRADESH-262722
Full Address: (Temporary) : VILL-PARSIYA PO- LAKHUN, VILL-PARSIYA PO- LAKHUN, PS- ISANAGAR, KHERI-UTTAR PRADESH-262722
Fitness Up To : 04-Feb-2036
Owner Serial No : 1

Registration Date : 05-Feb-2021
Purpose For Printing RC : NEW
Son/wife/daughter of : SRI BINDRA PRASAD
Tax Up To : One Time

Detailed Description

Class of Vehicle : M-CYCLE/SCOOTER
Ownership : INDIVIDUAL
Maker's Name : HERO MOTOCORP LTD
Front HSRP No : AA2029044527
Type of Body : SOLO WITH PILLION
No of Cylinders : 1
Engine No : JA07ABMGA05891
Horse Power(BHP) : 10.72
Maker's Classification : SUPER SPLENDOR-DISC-SE LF-CAST
Seating Cap(in all) : 2
Sleepar Cap : 0
Colour : METALLIC NEXUS BLUE
Other Criteria :
Vehicle Purchase As : Fully Built

Link Vehicle No :
Norms : BHARAT STAGE VI
Rear HSRP No : AA2029655986
Month/Year of Manuf. : 01/2021
Chassis No : MBLJAW181MGA01781
Fuel : PETROL
Cubic Capacity : 124.70
Wheel base : 1273
Standing Cap : 0
Unladen Wt (kgs) : 123
Laden/GV Wt (kgs) : 253
AC Fitted : NO

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 : 02-Feb-2021
OTT Date : 02-Feb-2021
TaxUpTo : One Time
Tax Exempted or Not : NOT EXEMPTED
Sale Amt : 73650/-
Amount/Rcpt No : 7365 / UP31D21020000350
Vehicle is Govt/ Pvt : PRIVATE
Date of Approval : 05-Feb-2021

Other State/Transfer/Conversion Details

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

This certificate is valid from 05-Feb-2021 to 04-Feb-2036

Date : 03-Mar-2021 15:03:33

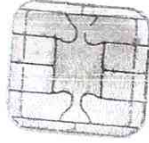
Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority
Date : 03-Mar-2021

UNION OF INDIA **Driving Licence**

UP NT

UP31 20180008525



जारी करने की तिथि
Date of Issue
24/07/2018

वैधता / Validity
24/06/2037

जन्म तिथि
Date of Birth
25/06/1987

Blood Group
Unknown



नाम / Name

BRIJNANDAN KUMAR

पिता/पति का नाम / Son/Daughter/Wife of

BINDRA PRASAD

Brijnandan Kumar

UP31 20180008525

UP06770920MT



LMV
24/07/2018



MCWG
24/07/2018



UP

Form 7 Rule 16(2)

पता / Address

VILL PARSIYA
PO LAKHUN
Dhaurahara, Kheri, UP - 262722

Holder's Signature

जारीकर्ता / Issuing Authority Sign
LAKHIMPUR KHERI

9839805410



भारत सरकार
GOVERNMENT OF INDIA



बृजनन्दन कुमार

Brijnandan Kumar

जन्म तिथि / DOB: 25/06/1987

पुरुष / MALE

Mobile No.: 9839805410

8313 6201 1877

मेरा आधार, मेरी पहचान

Brijnandan Kumar



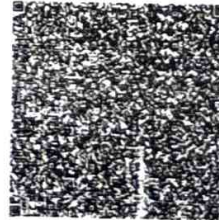
भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:

S/O बिन्द्रा प्रसाद, परसिया पोस्ट लाखुन, परसिया,
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INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA

BRIJNANDAN KUMAR

BINDRA PRASAD

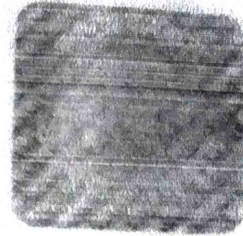
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Permanent Account Number

ELBPK1594M

Brijnandan Kumar

Signature



17062016

Brijnandan Kumar