

Program Proposal Two-Wheeler Package Contract - Bundled



Package Contract No.: MS/2025/7001/O/46575/464533

Motorsathi Care Private Limited
 D-27, Shastri Nagar, Meerut, Uttar Pradesh, (250004) 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	
LUCKY VERMA	2001-07-10	8318965032	RASRAJ VERMA	Hero Motorsorp	SPLENDOR PLUS	
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity	Vehicle Type
13S SELF DRUM	UP31BM5630	HA11EYLHF13139	MBLHAW129LHF15610	2020-07-31	100	TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV	
29000.00	NA	0.00	0.00	0.00	29000.00	
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	2099.31	
Address			City / District	Pin Code	State	
MOH. - RAM NAGAR, POST - LAKHIMPUR, PS - KOTWALI SADAR, KHERI				262701	Uttar Pradesh	
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
RASRAJ VERMA	Male	48 Years	FATHER	2025-08-29 14:31	Midnight of 2026-08-28	

Section A, VRC: 524.10 TCR: 0.00 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 **Total with GST(A): 524.10**
 Section B, EC: 664.00 EC Service: 106.00 ECPD: 0.00 Sub Total: 770.00 TAC: 0.00 ENC: 0.00 EDC: 0.00 MCPD: 0.00 **Total(B): 770.00 GST (CGST @9% + SGST @9%) (B): 138.60 Total with GST(B): 908.60**
 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: 190.35 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 34.26 **Total with GST(D): 224.61**
Total(Section A+B+C+D) Offered Price After Discount: 2099

Package Period Covered	2025-08-29 To 2026-08-28	2026-08-29 To 2027-08-28	2027-08-29 To 2028-08-28	2028-08-29 To 2029-08-28	2029-08-29 To 2030-08-28
ADV	29000	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 2025-08-29 until 2026-08-28

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 Companies 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 material 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 shall 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 PRIVATE LIMITED 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 Meerut.



7: Received with Thanks Rs 2099.31 ON 2025-08-29 from Mr./Ms. LUCKY VERMA against the ARN No. INCP00464533
 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: D-27, Shastri Nagar, Meerut, Uttar Pradesh, (250004), India



GOVERNMENT OF UTTAR PRADESH
Transport Department LAKHIMPUR KHERI
FORM 23
CERTIFICATE OF REGISTRATION



Registration No : UP31BM5630 Registration Date : 21-Jul-2020
Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : TO
Dealer's Name & Address : MUSA RAM AUTO SALES, L R P ROAD, LAKHIMPUR KHERI, . . .
Owner Name : LUCKY VERMA Son/wife/daughter of : RASRAJ VERMA
Full Address: (Permanent) : MOH. - RAM NAGAR, POST - LAKHIMPUR, PS - KOTWALI SADAR, KHERI, UTTAR
PRADESH-262701
Full Address: (Temporary) : MOH. - RAM NAGAR, POST - LAKHIMPUR, PS - KOTWALI SADAR, KHERI-UTTAR
PRADESH-262701
Fitness UpTo : 20-Jul-2035 Owner Serial No : 2
Detailed Description
Class of Vehicle : M-CYCLE/SCOOTER Link Vehicle No :
Ownership : FIRM Norms : BHARAT STAGE VI
Maker's Name : HERO MOTOCORP LTD
Front HSRP No : AA2016747351 Rear HSRP No : AA2016305358
Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 06/2020
No of Cylinders : 1 Chassis No : MBLHAW129LHF15610
Engine No : HA11EYLHF13139 Fuel : PETROL
Horse Power(BHP) : 7.91 Cubic Capacity : 97.20
Maker's Classification : SPLENDOR +(I3S-SELF-DR Wheel base : 1236
UM-CAST)
Seating Cap(in all) : 2 Standing Cap : 0
Sleepar Cap : 0 Unladen Wt (kgs) : 112
Colour : BLACK-SILVER STR 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 : 30-Jun-2020 Sale Amt : 63700/-
OTT Date : 30-Jun-2020 Amount/Rcpt No : 6370 / UP31D20070000561
Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
Date of Approval : 04-Jul-2023
Other State/Transfer/Conversion Details
Previous Owner : SRI BALAJEE Previous RegNo :
ENTERPRISES
Old State : Entry Date :
Transfer Date : 01-Jul-2023 Conversion Date :

This certificate is valid from 21-Jul-2020 to 20-Jul-2035

Date : 04-Jul-2023 13:51:36
Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority
Date : 04-Jul-2023

P 3068275

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-0226-898 Date 28-02-2026
 Customer Name SHRI BALAJI INTERPRISES Contact No: 9304877952
 VIN GSTIN09AJPPP6921M1ZD Model SPLENDOR +
 Insurance Company MBLHAW129LHF15610 Reg No. UP31BM5630
 HMCGL Card No HMCGL Card Category

S No	Part Number	HSN No.	Billing Type	Rate	Qty	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount
1	33100AAE941S -LIGHT ASSEMBLY HEAD LAMP	85122010	Paid	2,542.37	1	9.00	9.00	0.00	0.00	0.00	0.00	3,000.00
2	83410AAE300RS -FR VISOR BLACK NH 1 TYPE 1	87141090	Paid	866.95	1	9.00	9.00	0.00	0.00	0.00	0.00	1,023.00
3	3345AKCC710S -WINKER ASSY L FR(W/O BULB)	85122010	Paid	177.97	1	9.00	9.00	0.00	0.00	0.00	0.00	210.00
4	K50506KCCA900LS -KIT STEP	87141090	Paid	190.68	1	9.00	9.00	0.00	0.00	0.00	0.00	225.00
5	77300AAE400RS -R SIDE COWL (BLACK NH-1,TYPE -1)	87141090	Paid	449.15	1	9.00	9.00	0.00	0.00	0.00	0.00	530.00
6	3365AKCC710S -WINKER ASSY L RR (W/O BULB)	85122010	Paid	173.73	1	9.00	9.00	0.00	0.00	0.00	0.00	205.00
7	50803KST940S -GUARD LEG	87141090	Paid	527.12	1	9.00	9.00	0.00	0.00	0.00	0.00	622.00
Parts Total											0.00	5,815.00

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	5,815.00
Parts Total	2,000.10
Labour Total	443.52
SGST (Parts) 9%	443.52
CGST (Parts) 9%	152.55
SGST (Labour) 9%	152.55
CGST (Labour) 9%	7,815.10
Total	

Rupees in Words: Seven Thousand Eight Hundred Fifteen and paise Ten Only

Authorised Signatory

10730 - Main W/S

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.

To / सेवा में,
The Oriental Insurance Co Ltd /
दि ओरिएण्टल इश्योरेंस कंपनी लिमिटेड
MEERUT

आर्य समाज
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.	लकी वर्मा, 8318965032
2	Vehicle No. / वाहन संख्या	UP31BM 5630
3	Policy No. / पालिसी संख्या	M8/2025/7001/0/46575/464533
4	Period of Insurance / बीमा अवधि	29/08/2025 से 28/08/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	22/02/2026 @ 03:30PM.
6	Place of Accident / दुर्घटना का स्थान	रामापुर के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	रसराज वर्मा, 8948220250 UP3120190014879
8	Estimated Loss / अनुमानित हानि	
09. Cause of Accident / दुर्घटना का कारण : रामापुर के पास सामने से गाड़ी से टकरा हो गई जिससे मेरी गाड़ी बायीं ओर गिरकर क्षतिग्रस्त 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.	MOSARAM AUTO SALES, LRPROND LAKHIMPUR KHERI, 91511540536.

Date / दिनांक : 24/02/2026
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/2025/7001/0/46575/4645
33

Tel. No. _____

Period of Insurance 29/08/2025 से 28/08/2026
 Claim No. _____

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

1. INSURED

- (a) Name : LUCKY VERMA
- (b) Address for correspondence : RIDMOH-RAMNAGAR PS-LAKHIMPUR PS-KOTWALI,
SADAR KHERT
- (c) Telephone : 8318965032

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2020</u>	Engine No. <u>HATTEYLHF13139</u> Chassis No. <u>MBLHAW129LHF15610</u>	Registration No. <u>UP31BM</u> <u>5630</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 _____

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 : RASRAJ VERMA
(b) Age : 16/07/1977
(c) Address : MO- RAM NAGAR PK- KOTWALI SADAR,
LAKHIMPUR- KHERI, UP 262701
(d) Is the Driver
1. Owner : No
2. paid driver? : No
3. Owner's relative or friend? : FATHER
(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 20190014879
(h) Issuing Authority : 13/11/2019
(i) Date of Expiry : 12/12/2029
(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 : 22/02/2026 3:30 PM.
(b) Place : रामपुर के पास
(c) Speed of vehicle at the time of accident : 30-40 KM/H
(d) Give a short description of the accident : रामपुर के पास सामने से गाड़ी से टक्कर हो गई जिससे
(e) If any third party was responsible for this accident give the name and address : मेरी गाड़ी बाँधी और गेरकर क्षतिग्रस्त हो गई

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : FRONT AND LEFT
(b) Estimated cost of repairs : MOSARAM AUTO SALES, LRP
(c) When and where can the damaged vehicle be inspected : 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? : 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? : _____
- (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 24/02/ 2006

Signature of the insured Reckey Verma 24/02/2006

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. UP31BM5630 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 Ricky Sharma 24/02/2026
Occupation
Address

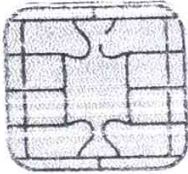
Bank Account Number
Name of the Bank



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



UP31 20190014879



Issue Date **13-12-2019** Validity (NT) **12-12-2029** Validity(TR)* **-----**



(Signature)

Holder's Signature

Date of First Issue **(13-12-2019)**

Name: **RASRAJ VERMA**
 Date of Birth: **16-07-1977** Blood Group: Organ Donor: **N**
 Son/Daughter/Wife of: **RAMSWARUP**
 Address:
MOH-RAM NAGAR PS KOTWALI SADAR
Lakhimpur, Kheri, UP 262701

DL No: UP31 20190014879

UPDL000001937581



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	UP31	13-12-2019	NT			
	LMV	UP31	13-12-2019	NT			
	MVSD						

Form 7 Rule 16(2)

Emergency Contact Number

Licensing Authority
UP31 LAKHIMPUR KHERI



भारत सरकार

Government of India



Aadhaar No. Issued: 02/01/2014



लकी वर्मा
LUCKY VERMA
जन्म तिथि / DOB : 10/07/2001
पुरुष / Male



आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं ।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/
ऑफलाइन 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).

5880 1562 2963

मेरा आधार, मेरी पहचान

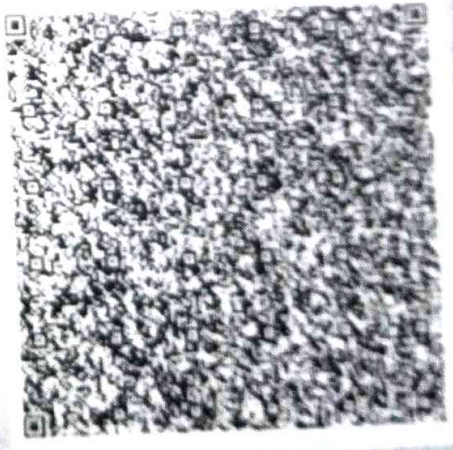


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता: S/O. रसराज वर्मा, राम नगर, लखीमपुर,
खीरी, उत्तर प्रदेश, 262701
Address: S/O: Rasraj Verma, RAM NAGAR,
Lakhimpur, Kheri, Kheri, Uttar Pradesh,
262701

Details as on 19/08/2024



5880 1562 2963



1947

help@uidai.gov.in

www.uidai.gov.in

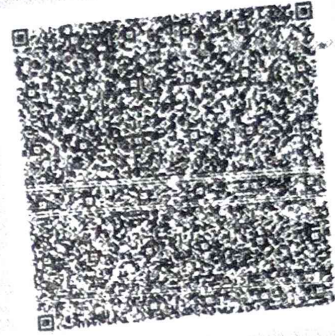
आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
BUKPV7603K



नाम / Name
LUCKY VERMA

पिता का नाम / Father's Name
RASRAJ VERMA

जन्म की तारीख /
Date of Birth
10/07/2001

Lucky Verma
हस्ताक्षर / Signature

17082019