

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-0226-891	Date	26-02-2026
Customer Name	SHALINDRA ..	Contact No.	7307125597
VIN	MBLHAW140RHC04254	Model	HF DELUXE
Insurance Company		Reg No.	UP31CE3832
HMCGL Card No	1073024860000927	HMCGL Card Category	Platinum

S No	Part Number	HSN No.	Billing Type	Rate	Qty	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount
1	3310BAAH10099S -LIGHT ASSY. HEAD	85122010	Paid	444.92	1	9.00	9.00	0.00	0.00	0.00	0.00	525.00
2	83400KSTH50ZDS -FR VISOR(CBR)	87141090	Paid	937.29	1	9.00	9.00	0.00	0.00	0.00	0.00	1,106.00
3	61100AAH100US -FENDER FRONT COMPLETE(R-195C)	87141090	Paid	706.78	1	9.00	9.00	0.00	0.00	0.00	0.00	834.00
4	53175AAFH00S -LEVER COMP.R STRG.HNDL.	87141090	Paid	77.97	1	9.00	9.00	0.00	0.00	0.00	0.00	92.00
5	83500AAH100RS -R SIDE COVER(BLACK NH-1(TYPE-1))	87141090	Paid	452.54	1	9.00	9.00	0.00	0.00	0.00	0.00	534.00
6	50803KST940S -GUARD LEG	87141090	Paid	527.12	1	9.00	9.00	0.00	0.00	0.00	0.00	622.00
7	77210AAH100RS -RIGHT REAR COWL (BLACK NH-1 (TYPE-1))	87141090	Paid	405.93	1	9.00	9.00	0.00	0.00	0.00	0.00	479.00
8	77220AAH100RS -LEFT REAR COWL (BLACK NH-1 (TYPE-1))	87141090	Paid	405.93	1	9.00	9.00	0.00	0.00	0.00	0.00	479.00
9	77230ACK000US -CENTER REAR COWL (BL-002M.)	87141090	Paid	109.32	1	9.00	9.00	0.00	0.00	0.00	0.00	129.00
10	K50506KCCA900RS -KIT STEP	87141090	Paid	190.68	1	9.00	9.00	0.00	0.00	0.00	0.00	225.00
11	37100AAFH00S -METER ASSY COMB	87141090	Paid	1,233.90	1	9.00	9.00	0.00	0.00	0.00	0.00	1,456.00
Parts Total											0.00	6,481.00

Labour Details

S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount	
1	102032 - ACCIDENTAL LABOUR-HF DELUXE	998729	Paid	1,272.00	9.00	9.00	0.00	0.00	0.00	0.00	1,500.96	
Jobs Total											0.00	1,500.96

Parts Total	6,481.00
Labour Total	1,500.96
SGST (Parts) 9%	494.31
CGST (Parts) 9%	114.48
SGST (Labour) 9%	114.48
CGST (Labour) 9%	114.48
Total	7,981.96

Authorised Signatory

Rupees in Words: Seven Thousand Nine Hundred Eighty One and paise Ninety Six Only

10730 - Main W/S

1. Terms Cash

GOVERNMENT OF UTTAR PRADESH
Transport Department LAKHIMPUR KHERI

FORM 23

CERTIFICATE OF REGISTRATION

Registration No : **UP31CE3832** Registration Date : **17-Apr-2024**
 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, , , 153-262701**
 Owner Name : **SHALINDRA** Son/wife/daughter of : **SRI PARSADI**
 Full Address: (Permanent) : **R/O SAILAGANV NIZAMPUR NAKTI KHERI, NIZAMPUR-NIGHATI, PS- KHERI, KHERI, UTTAR PRADESH-262721**
 Full Address: (Temporary) : **R/O SAILAGANV NIZAMPUR NAKTI KHERI, NIZAMPUR-NIGHATI, PS- KHERI, KHERI- UTTAR PRADESH-262721**
 Fitness Up To : **16-Apr-2039** 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 : **AA1033414843** Rear HSRP No : **AA1033213435**
 Type of Body : **SOLO WITH PILLION** Month/Year of Manuf. : **03/2024**
 No of Cylinders : **1** Chassis No : **MBLHAW140RHC04254**
 Engine No : **HA11ECRHC05310** Fuel : **PETROL**
 Horse Power(BHP) : **7.91** Cubic Capacity : **97.20**
 Maker's Classification : **HF DELUXE (DRS)** Wheel base : **1235**
 Seating Cap(in all) : **2** Standing Cap : **0**
 Sleepar Cap : **0** Unladen Wt (kgs) : **112**
 Colour : **CANDY BLAZING RED** 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.	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 **HERO FINCORP LTD., PUNE.**

PUNE . Pune, Maharashtra-411009 w.e.f. 13-Apr-2024.
 Purchase dt : **13-Apr-2024** Sale Amt : **67383/-**
 OTT Date : **13-Apr-2024** Amount/Rcpt No : **6739 / UP31D24040002901**
 Vehicle is Govt./ Pvt. : **PRIVATE** Tax Exempted or Not : **NOT EXEMPTED**
 Date of Approval : **20-May-2024**
 Other State/Transfer/Conversion/Reassign Details :
 Previous Owner :
 Old State :
 Transfer Date :
 Conversion Date :

This certificate is valid from **17-Apr-2024 to 16-Apr-2039**

Date : **24 May 2024 11 59 57**

Taxation Particulars / Advance Registration Mark Fee Details

राजियन अधिकारी
मोटो वाहन विभाग
 Signature of Printing Authority
 Date : **24-May-2024**

P 8123594

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

Oriental Insurance Co Ltd
दि ओरिएण्टल इश्योरेंस कंपनी लिमिटेड

Subject / विषय : Claim Intimation Letter / दावा सूचना पत्र . विषय : Claim Intimation

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.	SHALINDRA, 7307125597 बीमाधारक का नाम & मोबाइल नं.
2	Vehicle No. / वाहन संख्या	UP3ICE3832
3	Policy No. / पालिसी संख्या	MS/2025/700/0/46575/423262
4	Period of Insurance / बीमा अवधि	13/04/2025 से 12/04/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	24/2/2026, 12:00 PM
6	Place of Accident / दुर्घटना का स्थान	कुर्तिया गांव के पास
7	Name of the Driver, DL No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	PAWAN KUMAR MISHRA, 8318069941, UP3120180012554
8	Estimated Loss / अनुमानित हानि	
09.	Cause of Accident / दुर्घटना का कारण :	कंपनी से घर जाते समय रास्ते में कुर्तिया गांव के पास सामने बने हुए टम्बलर से गड़ि मिलते मेरी गाड़ी दायी ओर गिरकर हातिगुटर 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 LRP ROAD LAKHIMPUR KHERRI, 9151154036

Date / दिनांक : 24/02/2026
हस्ताक्षर

शालीन्द्र

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. M&I/2025/7001/016575/423262

Tel. No.

Period of Insurance 13/04/2025 to 12/04/2026
 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 : SHALINDRA
 (b) Address for correspondence : NO. SAILAGANN NIZAMPUR NAKTI KHERI, PS-KHERI
 (c) Telephone : 7307125597

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2024</u>	Engine No. <u>NAJJE CRNC05310</u> Chassis No. <u>MBLHAW140RNC04254</u>	Registration No. <u>UP31CE</u> <u>3832</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? N/A
 (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
- N/A

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : PAWAN KUMAR MISHRA
- (b) Age : 01/01/1983
- (c) Address : VILL: SAILGAON PO- NIZAMPUR NIKETI LMP, UP-202721
- (d) Is the Driver
1. Owner : No
 2. paid driver? : No
 3. Owner's relative or friend? : CHACHA
- (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 : UP3120180012554
- (h) Issuing Authority : 26/10/2018
- (i) Date of Expiry : 31/12/2032
- (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 : 21/02/2026 3:00 PM
- (b) Place : कलिया गाँव के पास
- (c) Speed of vehicle at the time of accident : 30-40
- (d) Give a short description of the accident : कलिया गाँव के पास लाइन केन से टक्कर से गाड़ी घिससे
- (e) If any third party was responsible for this accident give the name and address : मेरी गाड़ी क्षति और गिरकर हातिगत है गाड़ी।

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : FRONT AND RIGHT
- (b) Estimated cost of repairs : _____
- (c) When and where can the damaged vehicle be inspected : MOSARMA AUTO SALES LRROAD LAKHIMPUR KHETI, 9151154036

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? : _____ N/A
(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? : _____
(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 21/02/2006

Signature of the insured शाली

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. UP3ICE3832 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/-

शाली

Witness
Name
Signature
Address

Signature
Occupation
Address

Bank Account Number
Name of the Bank

Program Proposal Two-Wheeler Package Contract - Bundled



Package Contract No.: MS/2025/7001/O/46575/423262

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	
SHALINDRA	2002-01-01	7307125597	SRI PARSADI	Hero Motocorp	HF DELUXE	
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity	Vehicle Type
E20 DS	UP31CE3832	HA11ECRHC05310	MBLHAW140RHC04254	2024	100	TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV	
54000.00	NA	0.00	0.00	0.00	54000.00	
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Offered Payment (incl. GST)	
	Solo	HERO FINCORP LTD.	---	2	1729.59	
Address				City / District	Pin Code	State
R/O SAH AGANV NIZAMPUR NAKTI KHERI, NIZAMPUR-NIGHATI, PS- KHERI, KHERI, UTTAR PRADESH-262721					262721	Uttar Pradesh
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
KHUSHBU DEVI	Female	18 Years	WIFE	2025-04-13 12:37	Midnight of 2026-04-12	

Section A, VRC: 722.90 TCR: 254.88 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST(A) 977.78
 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: 262.55 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 47.26 Total with GST(D): 309.81
Total(Section A+B+C+D) Offered Price After Discount: 1730

Package Period Covered	2025-04-13 To 2026-04-12	2026-04-13 To 2027-04-12	2027-04-13 To 2028-04-12	2028-04-13 To 2029-04-12	2029-04-13 To 2030-04-12
ADV	54000	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 2029-04-12 (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.: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 1729.59 ON 2025-04-04 from Mr./Ms. SHALINDRA against the ARN No. INCP00423262
 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

शालिन्द्रा



CERTIFICATE OF REGISTRATION

Registration No : UP31CE3832
 Description of Vehicle : M-CYCLE/SCOOTER
 Dealer's Name & Address : MUSA RAM AUTO SALES, L R P ROAD, LAKHIMPUR KHERI, , 153-262701
 Owner Name : SHALINDRA
 Full Address: (Permanent) : R/O SAILAGANV NIZAMPUR NAKTI KHERI, NIZAMPUR-NIGHATI, PS- KHERI, KHERI, UTTAR PRADESH-262721
 Full Address: (Temporary) : R/O SAILAGANV NIZAMPUR NAKTI KHERI, NIZAMPUR-NIGHATI, PS- KHERI, KHERI- UTTAR PRADESH-262721

Registration Date : 17-Apr-2024
 Purpose For Printing RC : NEW
 Son/wife/daughter of : SRI PARSADI
 Owner Serial No : 1

Fitness Up To : 16-Apr-2039

Detailed Description

Class of Vehicle : M-CYCLE/SCOOTER
 Ownership : INDIVIDUAL
 Maker's Name : HERO MOTOCORP LTD
 Front HSRP No : AA1033414843
 Type of Body : SOLO WITH PILLION
 No of Cylinders : 1
 Engine No : HA11ECRHC05310
 Horse Power(BHP) : 7.91
 Maker's Classification : HF DELUXE (DRS)
 Seating Cap(in all) : 2
 Slecpar Cap : 0
 Colour : CANDY BLAZING RED
 Other Criteria : Fully Built

Link Vehicle No :
 Norms : BHARAT STAGE VI
 Rear HSRP No : AA1033213435
 Month/Year of Manuf. : 03/2024
 Chassis No : MBLHAW140RHC04254
 Fuel : PETROL
 Cubic Capacity : 97.20
 Wheel base : 1235
 Standing Cap : 0
 Unladen Wt (kgs) : 112
 Laden/GV Wt (kgs) : 242
 AC Fitted : NO

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

By Manuf.	Description	As Regd.	Weight(in kgs)
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- a) Front:
- b) Rear:
- c) Other:
- d) Tandem:

The motor vehicle above described is subject to Hypothecation in favour of HERO FINCORP LTD., PUNE, PUNE, Pune, Maharashtra-411009 w.e.f. 13-Apr-2024.

Purchase dt : 13-Apr-2024
 OTI Date : 13-Apr-2024
 Vehicle is Govt./ Pvt. : PRIVATE
 Date of Approval : 20-May-2024

Sale Amt : 67383/-
 Amount/Rcpt No : 6739 / UP31D24040002901
 Tax Exempted or Not : NOT EXEMPTED

Other State/Transfer/Conversion/Reassign Details :
 Previous Owner :
 Old State :
 Transfer Date :

Previous RegNo :
 Entry Date :
 Conversion Date :

This certificate is valid from 17-Apr-2024 to 16-Apr-2039

Signature of Registering Authority
 Date : 24-May-2024

Date : 24-May-2024 11:59:57
 Taxation Particulars / Advance Registration Mark Fee Details

Shalindra

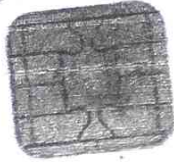
P 8123594



UNION OF INDIA Driving Licence

UP NT

UP31 20180012554



जारी करने की तिथि
Date of Issue
26/10/2018

वैधता / Validity
31/12/2032

जन्म तिथि
Date of Birth
01/01/1983

Blood Group
Unknown



नाम / Name

PAWAN KUMAR MISHRA

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

BASUDEV MISRA

UP31 20180012554

LP07077962MT


LMV
26/10/2018


MCWG
26/10/2018

UP

Form 7 Rule 16(2)

पता / Address

**SAILGAON
VILL SAILGAON PO NIZAMPUR NIKTI
Lakhimpur.Kheri.UP - 262721**

Holder's Signature

जारीकर्ता / Issuing Authority Sign
LAKHIMPUR KHERI



भारत सरकार
Government of India



शालीन्द्र
Shalindra
माता : चंद्रपति
Mother : Chandrpati
जन्म तिथि / DOB : 01/01/2002
पुरुष / Male



5444 4879 2821

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
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पता:
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SHALINDRA

पिता का नाम / Father's Name
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जन्म तिथि / Date of Birth
01/01/2002

शालीन्द्र

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