

GANPATI AUTOMOBILES

Purwa Chauraha, Deoria
Mob. - 7704004711, 7704800558

ESTIMATE

Owner's Name... Miruddin Ansari
Address... Deoria
Phone... 8141471591

Job No.
Date... 25/03/26
Chassis No.
Engine No.
Key No.
Regn. No. ... UP.52.BC.7608
Speedometer Redg.
Insurance No.
Model... Supra

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	Visor	1K	1100	1100	
2	HIC	10	615	615	
3	Wind Screen	1K	390	390	
4	F - Fender	1K	1300	1300	
5	F fork - Compositid - 1/R	1K	2500	5000	
6	Handle	1K	500	500	
7	Mirror - (2)	1K	150	150	
8	Liver - (2)	1K	100	100	
9	Matter Imen	1K	330	330	
10	F. Alloy Wheel	1K	4200	4200	
11	F. Winker (2)	1K	250	250	
12	Fuel tank	1K	8637	8637	
13					
14					
15					
16					
17					
18	LABOUR			600	
19					
20					
21					
22					
23					
24					
25					
TOTAL				23372	

- 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.

Ganpati Automobiles
Ganpati Road
Deoria
770400
For - Ganpati Automobiles
Mon 770400

I/We agree with the conditions and approve the estimate.

Customer's Signature.....

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.	AJRUDDIN ANSARI ☺ 8141471591
2	Vehicle No. / वाहन संख्या	UP52 BC7608
3	Policy No. / पालिसी संख्या	MS/2015/7001/C/46575/4540601
4	Period of Insurance / बीमा अवधि	07/07/2015 to 06/07/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	02/03/2026 ☺ 03:20 PM
6	Place of Accident / दुर्घटना का स्थान	BASANT PUR
7	Name of the Driver, D.L. No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	AJRUDDIN ANSARI ☺ UP5220100000163 - 8141471591
8	Estimated Loss / अनुमानित हानि	
09.	Cause of Accident / दुर्घटना का कारण :	वहनकर्ता ने बसतपुर जाते समय रास्ते में बसतपुर के पास रोड पर अचानक एक गाड़ी से टक्कर मारी, जिससे बसतपुर में गाड़ी अनियंत्रित होकर बाएँ हाईवे पेस में घुसी, गाड़ी बसतपुर में गाड़ी बाएँ हाईवे में घुसी और रुक 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 / फोन नं.	Ganpati Automobiles Purua Deoria 76519895 97

Date / दिनांक : 05/03/2026
हस्ताक्षर

Ajruddin Ansari

Ajruddin Ansari
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 _____

Certificate/Policy No. MS/2025/1001/0/46525/454061

Tel. No. _____

Period of Insurance 07/07/2025 to 06/07/2026
 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 : AIRUDDIN ANSARI
 (b) Address for correspondence : BARNAJ
 (c) Telephone : 8141471591

2. THE INSURED VEHICLE

Make & Year <u>Herc - 2019</u>	Engine No. Chassis No. <u>* 22606</u> <u>* 04799</u>	Registration No. <u>UP52 BC7608</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 : _____
- NA



3. DRIVER AT THE TIME OF ACCIDENT

(a) Name: AJABUDDIN ANSARI
(b) Age: 16/10/2020
(c) Address: BARRANA
(d) Is the Driver:
1 Owner: YES
2 paid driver?: NA
3 Owner's relative or friend?: Owner's
(e) If paid driver, how long has he been in your employment: NA
(f) Was he under the influence of intoxication (Liquor or drugs?): NA
(g) Driving Licence Number: UP3220100000063
(h) Issuing Authority: 11/01/2010
(i) Date of Expiry: 10/10/2030
(j) Was the licence temporary/permanent: permanent
(k) Details of endorsement/suspension, if any:
(l) Has he been involved in any accident before?: NA
(m) Has he been charged by the policy? If so, Why?: NA

4. OTHER INSURANCE

Details of other insurance Policies indemnifying you in respect of this accident: AX

5. DETAILS OF ACCIDENT

(a) Date and Time: 02/03/2026 @ 03:20 PM
(b) Place: BASANTPUR
(c) Speed of vehicle at the time of accident: 40 KM/H
(d) Give a short description of the accident:
(e) If any third party was responsible for this accident give the name and address:
विकास अंतर्गत एक गाडी चालकाने गाडी चलायुन ठोकली रिसले
उपरोक्त गाडी चालकाने गाडी चलायुन ठोकली रिसले गाडी चालकाने ठोकली रिसले
गाडी चालकाने ठोकली रिसले

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage: As per Estimated
(b) Estimated cost of repairs:
(c) When and where can the damaged vehicle be inspected: Compati Automobiles Purua Deira

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: NA
(e) Full details of property damaged:
(f) Has notice of any claim been given to you?:

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? : _____
(c) Was accident reported to Police? If not, Why? : NA
(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 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 05/03/26₂₀₀

Signature of the insured Ajmalin Ansari

Discharge Voucher

ACCIDENT DEPARTMENT

Claim No. _____

Issuing Office



The Oriental Insurance Company Limited
Head Office, A-25/27, Anand Ash 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 or future arising directly/indirectly in respect of the said accident

Rs _____

The Insured
License No. _____
Class No. _____
Vehicle No. _____

Witness
Name _____
Signature _____
Address _____

Signature Ajauddin Ansari
Occupation _____
Address _____

Bank Account Number _____
Name of the Bank _____

TRANSPORT DEPARTMENT, GOVERNMENT OF UTTAR PRADESH

Application for Services on Driving Licence

* Driving Licence Number: UP62 201000001 * Date of Birth: 16-10-1990

Personal Details and Particulars of existing Licence (Learners or Permanent) of the DL Holder

Name : AJARUDDIN ANSARI
Father's Name : MUNIR ANSARI
Date of Birth : 16-10-1990
Present Address: BARANAI
RAMPUR KARKHANA
DEORIA

DL Holder Last Endorsed Details :

State- Uttar Pradesh BTO - ASST.RTO, DEORIA

Class of Vehicles :

Validity Period

COV Abbr.	Issue Date & Issue Authority	Non - Transport	11-01-2010 to 10-01-2030
MCWG	ASST.RTO, DEORIA	-	
LMV	ASST.RTO, DEORIA	-	

Confirmed that the above Driving Licence details are mine: Select

Category of the Driving Licence Holder : General

Select only if the Driving Licence Holder belongs: Ex-Servicemen / Repatriate / Refugees / Diplomats / Foreigner / Foreigners (But not Diplomats) / Physically Challenged

Submit Request to

To know your RTO Office Enter the pin code of Applicants Present Address here

State: Uttar Pradesh BTO Office

Deposit Reset Exit

(* Mandatory Fields)

Note: 1) DL Number can be entered in any format. For example if DL Number is : RJ-14/DLC/00/01059 then it can be entered in any one of the below mentioned formats :

- i) RJ14 20000091059 or ii) RJ1420000091059 or iii) RJ14 /2000/0091059 or iv) RJ-14



भारत सरकार
Government of India



अजरुद्दीन अंसारी
Ajaruddin Ansari
जन्म तिथि/DOB: 16/10/1995
पुरुष/ MALE

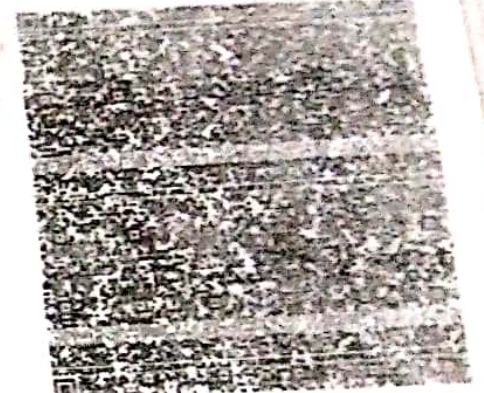
3580 2488 2657

VID : 9180 6705 3502 1354

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



Download Date: 07/12/2022

S/O: मुनीर अंसारी, बरनाई, पोस्ट.ऑफिस.- बरनाई, बरनाई
खान, देवरिया,
उत्तर प्रदेश - 274201
Address:
S/O: Munir Ansari, BARNAL, P.O.- BARNAL,
Barnal Khas., Deoria,
Uttar Pradesh - 274201

3580 2488 2657

VID : 9180 6705 3502 1354



help@uidai.gov.in

www.uidai.gov.in

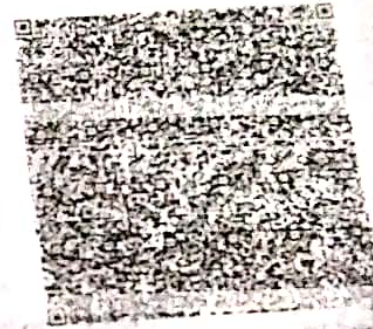
आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
DOBPA2471F



नाम / Name
AJRUDDIN ANSARI

पिता का नाम / Father's Name
MUNIR ANSARI

जन्म की तारीख /
Date of Birth
10/1995

Ajruddin Ansari
हस्ताक्षर / Signature

712211





GOVERNMENT OF UTTAR PRADESH

Transport Department Deoria
FORM 23

CERTIFICATE OF REGISTRATION



Registration No : UP52BC7608 Registration Date : 02-Dec-2019
 Description of Vehicle : M CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : GANPATI AUTOMOBILES (D), PURWA CHAURAJA GKP ROAD DEORIA
 Owner Name : AJRUDDIN ANSARI Son/wife/daughter of : MUNIR ANSARI
 Full Address: (Permanent) : VILL&PO BARNAL PS DEORIA, DEORIA, UTTAR PRADESH-274001
 Full Address: (Temporary) : VILL&PO BARNAL, PS DEORIA, DEORIA-UTTAR PRADESH-274001
 Fitness UpTo : 01-Dec-2034 Tax UpTo : One Time
 Owner Serial No : 1

Detailed Description

Class of Vehicle : M CYCLE/SCOOTER Link Vehicle No :
 Ownership : INDIVIDUAL Norms : BHARAT STAGE IV
 Maker's Name : HERO MOTOCORP LTD
 Front HSRP No : AA2007329063 Rear HSRP No : AA2008055653
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 11/2019
 No of Cylinders : 1 Chassis No : MBIJAW000K9L04799
 Engine No : J705EGK9L22606 Fuel : PETROL
 Horse Power(BHP) : 9.00 Cubic Capacity : 124.70
 Maker's Classification : SUPER SPLENDOR(DRUM Wheel base : 1265
 -SELF-GAS)
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleeper Cap : 0 Unladen Wt (kgs) : 121
 Colour : Grey Black Laden/GV Wt (kgs) : 261
 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 SHRI RAM CITY UNION FINANCE LTD, Deoria, Uttar Pradesh-274001 w.e.f. 25-Nov-2019.

Purchase dt : 21-Nov-2019 Sale Amt : 59650/-
 OTT Date : 21-Nov-2019 Amount/Rcpt No : 5965 / UP52D/0110003007
 TaxUpTo : One Time Vehicle is Govt./ Pvt. : PRIVATE
 Tax Exempted or Not : NOT EXEMPTED Date of Approval : 02-Dec-2019

Other State/Transfer/Conversion Details

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

This certificate is valid from 02-Dec-2019 to 01-Dec-2034

Date : 30 Dec-2019 14:05:30

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registration Authority



066090

Program Proposal Two-Wheeler Package Contract - Bundled

Package Contract No.: MS/2025 70010146575 454061

Motorsathi Care Private Limited
 B-1 Class Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh - 201001, India
 Contact Us at
 Phone: +91 70410 50611
 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
AJRUDDIN ANSARI	1995-10-16	814147189	MUNIR ANSARI	Hero MotoCorp	SPURION 125-SD0908
Sub Model	Vehicle Regn. No	Engine No.	Chassis No	Year of Mfg	Cubic Capacity Vehicle Type
DRUM SILE CASI BLA	UPS2BC7608	JA05EGK9L22606	MRLJAW09080704799	2019-12-02	125 cc 2W
Asset Declared Value (ADV)	Side Car ADV	Non Electrical Accessories ADV	Electrical Accessories ADV	CGST @9% Incl ADV	Total ADV
21500.00	NA	0.00	0.00	0.00	21500.00
Place of Regn.	Body Type	HP Lease Hire-Purchase Agreement	Branch Office of HP Lease/Hire-Purchase	Seating Capacity	Offered Payment (incl. GST)
	Side			2	1772.44
Address			City / District	Pin Code	State
VILLAPOBARNAL, DISTRICT ALIGARH, UTTAR PRADESH				201001	Uttar Pradesh
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
NASTIRA KHATOON	Female	49 Years	MOTHER	2025-07-07 To 24-06-2026	Midnight of 2026-07-07
Section A: VRC: 410.14 TCR: 0.00 Less Hand-apped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (9%) : 0.00 Total with GST(A): 110.14					
Section B: EC: 664.00 LC Service: 100.00 ECPD: 0.00 Sub Total: 764.00 TAC: 0.00 ENC: 0.00 EIC: 0.00 MCPD: 0.00 Total(B): 764.00 GST @ 9% + SGST @ 9% (B): 137.24 Total with GST(B): 901.24					
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: 148.96 AHDC, DOC & Additional Optional Type: 2.00 ST: 2.00 Discount: 0.00 GST (CGST @9% + SGST @9%): 3.87 Total with GST(D): 175.83					
Total/Section A+B+C+D) Offered Price After Discount: 1772.44					
Package Period Covered	2025-07-07 To 2026-07-06	2026-07-07 To 2027-07-06	2027-07-07 To 2028-07-06	2028-07-07 To 2029-07-06	2029-07-07 To 2030-07-06
ADV	21500	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 2025-07-07 until 2026-07-06

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 promotional) c) Organized Racing d) Race 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 his license. Provided also that the person holding an effective Learners License may also drive the vehicle and that each 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. 1000. 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

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, nondisclosure of material fact or non-co-operation of the coverage

ANTI-MONEY LAUNDERING CLAUSE: In the event of a request under the package or under Rs. 10000 or a request for refund of payment exceeding Rs. 10000, the person coming with the package of the company. The AMI 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. 70410 50611 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 company by reason of wider terms appearing in the Certificate. All disputes arising out of or in connection with this agreement shall be referred to the exclusive jurisdiction of the courts at Aligarh

* Received with Thanks Rs 1772.44 ON 2025-07-07 from Mr. Ms. AJRUDDIN ANSARI against the ARN No. INCP09454061

The acknowledgement is subject to a compulsory excess of Rs. 1000 & Depreciation is applicable under terms & conditions
 (Please turn overleaf for details) Consolidated Stamp Duty Paid Endorsements: IMT - 22, 16, 18

Customer Service Address: B-1 Class Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (201001)