

To / सेवा में,  
The Oriental Insurance Co Ltd /  
दि ओरिएण्टल इश्योरेंस 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.	SANJAY CHAKRAWARTI 904444 7906
2	Vehicle No. / वाहन संख्या	UP31 BV 9930
3	Policy No. / पालिसी संख्या	MS/2025/7001/L0/46575/927873
4	Period of Insurance / बीमा अवधि	18/04/2025 से 17/04/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	10/09/2026 से 8:00 AM
6	Place of Accident / दुर्घटना का स्थान	मोतीपुर के पास
7	Name of the Driver, DL No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	SURAJ KAYSHAP: 904444 7906 UP31 20/30010371
8	Estimated Loss / अनुमानित हानि	NO
09.	Cause of Accident / दुर्घटना का कारण :	लखीमपुर से जायल आ रहे थे तभी मोतीपुर के पास सामने गाया आ गई जिससे मेरी गाड़ी तबनाकल टाये साइड गिरकर क्षतिग्रस्त हो गई।
10	Spot Survey / स्पॉट सर्वे / स्पॉट सर्वेयर का नाम	NO
11	Third Party Loss / तृतीय पक्ष हानि / FIR No.	NO
12	Name of the Workshop, Address & Contact No./वर्कशॉप का नाम, पता & मोबाइल / फ़ोन नं.	MOSA RAM Auto Sales L.R.P Road Lakhimpur Khari 9151154036

Date / दिनांक : 12/09/2026  
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 MEE RUT.

Certificate/Policy No. MS/2025/7001/10/46575/

Tel. No.

Period of Insurance 18/09/2025 to 17/09/2026 <sup>427673</sup>

Claim No. \_\_\_\_\_

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

I. INSURED

- (a) Name : SANJAY CHAKRAWARTI.  
 (b) Address for correspondence : Mohla - Shiv colony, Lakshmi Kheri.  
 (c) Telephone : 9099 47906

2. THE INSURED VEHICLE

Make & Year <u>Hero/ 2022.</u>	Engine No. <u>HA11EDNH02304</u> Chassis No. <u>MBLHAW124NHD70186</u>	Registration No. <u>UP31BV</u> <u>9930</u>
-----------------------------------	---	--

- (a) Was the vehicle in proper working condition? YES  
 (b) For what purpose was the vehicle being used at the time of accident? NO  
 (c) Was trailer attached? NO  
 (d) If a Motor Cycle/scooter NO  
 1. Was a side-car attached NO  
 2. Was a pillion rider carried NO

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 : SURAJ KASHAP.
- (b) Age : 71/07/1985
- (c) Address : CHHAUCHH NAHAR Colony - Lakhimpur Khari
- (d) Is the Driver
1. Owner : NO
  2. paid driver? : NO
  3. Owner's relative or friend? : relative.
- (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 20130010371
- (h) Issuing Authority : 8/10/2013
- (i) Date of Expiry : 07/10/2033
- (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 : 10/04/2026.
- (b) Place : मातीकुटके पास
- (c) Speed of vehicle at the time of accident : 20-30 km/h
- (d) Give a short description of the accident : लंबी दूरी से चलाया गया था, जो रूढ़ था तभी मातीकुटके पास समत
- (e) If any third party was responsible for this accident give the name and address : गाँव आ गये जिसमें गाड़ी टक्कराकल गिरे सब गिरकर  
: काट डालिये गए हो गये।

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : Front and Right.
- (b) Estimated cost of repairs : NO
- (c) When and where can the damaged vehicle be inspected : Mosh AAM auto Sales L.R.P Road - Lakhimpur Khari

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 : / NIA.
- (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? : \_\_\_\_\_ *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? : */ NIA.*
- (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? : \_\_\_\_\_
- (g) When? : */ NIA*
- (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 12/04/2026.200

Signature of the insured \_\_\_\_\_

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 .....

Address: (Per Full Address)

## Program Proposal Two-Wheeler Package Contract - Bundled

Contract No. MS 2024 7001 01 06574 427873

Contract Description

Vehicle Make	Make	Model	Year of Mfg	Cubic Capacity	Vehicle Type
CHANDRABHAI	Hero Motocorp	SPLENDOR PLUS	2022-04-24	100	TW
Chassis No.	Electrical Accessories ADV	Total ADV	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Offered Payment (incl. GST)
MH11AW124NH10180	0.00	45000.00	---	2	1700.00
Non Electrical Accessories ADV	City/District	Pin Code	State	Urban/Rural	Nominee Gender
0.00	---	---	---	---	---
HP Lease/Hire-Purchase Agreement	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
---	25 Years	WIFE	2025-04-18 16:39	Midnight of 2026-04-17	

Less: Dealer offered Discount: 0.00 Tax Amt: Health Discount: 0.00 PA BONUS (30%) : 258.18 Total with GST(A) : 666.30

Less: EDC : 0.00 Sub Total : 666.30 EDC : 0.00 EDC : 0.00 MCPD : 0.00 Total(B) : 0.00 GST (CGST @9% + SGST @9%) (B) : 0.00 Total =

MS Services with GST(C) : 443.00

MS Services with GST(C) : 443.00 Alloy wheel Cover Other Discount: 0.00 GST (CGST @9% + SGST @9%) : 69.30 Total =

MS Offered Price After Discount : 1700

Period	2025-04-18 To 2027-04-17	2027-04-18 To 2028-04-17	2028-04-18 To 2029-04-17	2029-04-18 To 2030-04-17
...	...	...	...	...
...	...	...	...	...

INSURANCE COVERAGE TAKEN FROM AN INSURANCE COMPANY VALID UPTO 2027-04-17 (DETAILS ...)

For any purpose other than: a) Hire or Reward b) Carriage of goods (other than samples or personal baggage) c) ...

... holds an effective driving license at the time of the accident and is not disqualified from it ...

... in respect of any one request or series of requests arising out of one event: Up to Rs. ...

... The company may cancel the package by sending 7 days' notice in case ...

... exceeding Rs. 1 lakh or a request for refund of payment exceeding Rs. 1 lakh, the actual ...

Website: www.motorsathi.com Customer Care: Toll Free Phone No. ...



... against the ARN No. INC P00427873

... Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh. (2020)

**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.

MOSARAM AUTO SALES

AU

Kheri (L)  
Lakhin  
Lakhimp

AW

da

2

Km.

**ESTIMATE**

Estimate No.	10730-03-REST-0426-57	Date	14-04-2026
Customer Name	SANJAY CHAKRAWATI	Contact No.	9044447906
VIN	MBLHAW124NHD70186	Model	SPLENDOR +
Insurance Company		Reg No.	UP31BV9930
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	K44446AAMB000S -"KIT, WHEEL COMP. FRONT"	87141090	Paid	3,968.64	1	9.00	9.00	0.00	0.00	0.00	0.00	4,683.00
2	61000AAE200VS -FRONT FENDER (NH-35M)	87141090	Paid	1,317.80	1	9.00	9.00	0.00	0.00	0.00	0.00	1,555.00
3	83410AAE300RS -FR VISOR BLACK NH 1 TYPE 1	87141090	Paid	868.64	1	9.00	9.00	0.00	0.00	0.00	0.00	1,025.00
4	33100AAE941S -LIGHT ASSEMBLY HEAD LAMP	85122010	Paid	2,733.05	1	9.00	9.00	0.00	0.00	0.00	0.00	3,225.00
5	3340AKCC710S -WINKER ASSY R FR(W/O BULB)	85122010	Paid	177.97	1	9.00	9.00	0.00	0.00	0.00	0.00	210.00
6	37100ADHB1099S -METER ASSEMBLY COMB	87141090	Paid	1,394.07	1	9.00	9.00	0.00	0.00	0.00	0.00	1,645.00
7	53100AAE110S -PIPE STRG HANDLE	87141090	Paid	389.83	1	9.00	9.00	0.00	0.00	0.00	0.00	460.00
8	50803KST940S -GUARD LEG	87141090	Paid	527.12	1	9.00	9.00	0.00	0.00	0.00	0.00	622.00
9	17520AAE3054S -FUEL TANK (BLACK NH 1) TYPE 4	87141090	Paid	4,979.66	1	9.00	9.00	0.00	0.00	0.00	0.00	5,876.00
10	83600KCC830ZBS -L SIDE COVER (BLACK NH-1)	87141090	Paid	636.44	1	9.00	9.00	0.00	0.00	0.00	0.00	751.00
11	51400KSTA11S -FORK ASSY R FR	87141090	Paid	1,991.53	1	9.00	9.00	0.00	0.00	0.00	0.00	2,350.00
12	51500KWHY01S -FORK ASSY L FRONT	87141090	Paid	1,542.37	1	9.00	9.00	0.00	0.00	0.00	0.00	1,820.00
13	50100KCC710S -FRAME BODY COMP -KCC Y2K5	87141090	Paid	6,004.24	1	9.00	9.00	0.00	0.00	0.00	0.00	7,085.00
<b>Parts Total</b>											0.00	31,307.00

**Labour Details**

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	
<b>Jobs Total</b>											0.00	2,000.10

<b>Parts Total</b>	31,307.00
<b>Labour Total</b>	2,000.10
<b>SGST (Parts) 9%</b>	2,387.82
<b>CGST (Parts) 9%</b>	2,387.82
<b>SGST (Labour) 9%</b>	152.55
<b>CGST (Labour) 9%</b>	152.55
<b>Total</b>	<b>33,307.10</b>



GOVERNMENT OF UTTAR PRADESH

Transport Department LAKHIMPUR KHERI

FORM 23

CERTIFICATE OF REGISTRATION

Registration No : UP31BV9930 Registration Date : 24-Apr-2022  
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW  
 Dealer's Name & Address : M/S SHRI NARAIN AUTO, LMP ROAD GOLA, LAKHIMPUR-KHERI, ...  
 Owner Name : SANJAY CHAKRAWARTI Son/wife/daughter of : CHANDRABHAL  
 Full Address: (Permanent) : MOH - SHIV COLONY, LAKHIMPUR, , KHERI, UTTAR PRADESH-262701  
 Full Address: (Temporary) : MOH - SHIV COLONY, LAKHIMPUR, , KHERI-UTTAR PRADESH-262701  
 Fitness UpTo : 23-Apr-2037 Tax UpTo : One Time  
 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 : AA2052979949 Rear HSRP No : AA2052758051  
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 04/2022  
 No of Cylinders : 1 Chassis No : MBLHAW124NHD70186  
 Engine No : HA11EDNHD02304 Fuel : PETROL  
 Horse Power(BHP) : 7.91 Cubic Capacity : 97.20  
 Maker's Classification : SPLENDOR+ BLACK AND AC Wheel base : 1236  
 CENTSS  
 Seating Cap(in all) : 2 Standing Cap : 0  
 Sleepar Cap : 0 Unladen Wt (kgs) : 112  
 Colour : BLACK AND ACCENT 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 : 18-Apr-2022 Sale Amt : 70640/-  
 OTT Date : 18-Apr-2022 Amount/Rcpt No : 7064 / UP31D22040003714  
 TaxUpTo : One Time Vehicle is Govt./ Pvt. : PRIVATE  
 Tax Exempted or Not : NOT EXEMPTED Date of Approval : 25-Apr-2022  
 Other State/Transfer/Conversion Details  
 Previous Owner : Previous RegNo :  
 Old State : Entry Date :  
 Transfer Date : Conversion Date :  
 This certificate is valid from 24-Apr-2022 to 23-Apr-2037

Date 26-May-2022 12:30:34

Taxation Particulars / Advance Registration Mark Fee Details

Seen For Bill

Signature of Registering Authority  
 मोदी राम विक्रम  
 Date: 26-May-2022  
 लखीमपुर-कैरी

17/2/23

17/2/23

5/26/2022, 12:30:34

3 of 20 N

2217371

Uttar Pradesh Government Uttar Pradesh Government Uttar Pradesh Go  
 Uttar Pradesh Government Uttar Pradesh Government Uttar Pradesh Go

Scanned by CamScanner

GOVERNMENT OF UTTAR PRADESH

Transport Department LAKHIMPUR KHERI

FORM 23

CERTIFICATE OF REGISTRATION

Registration No : UP31BV9930 Registration Date : 24-Apr-2022  
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW  
 Dealer's Name & Address : M/S SHRI NARAIN AUTO, LMP ROAD GOLA, LAKHIMPUR-KHERI, ...  
 Owner Name : SANJAY CHAKRAWARTI Son/wife/daughter of : CHANDRABHAL  
 Full Address: (Permanent) : MOH - SHIV COLONY, LAKHIMPUR, , KHERI, UTTAR PRADESH-262701  
 Full Address: (Temporary) : MOH - SHIV COLONY, LAKHIMPUR, , KHERI-UTTAR PRADESH-262701  
 Fitness UpTo : 23-Apr-2037 Tax UpTo : One Time  
 Owner Serial No : 1

Detailed Description

Class of Vehicle : M-CYCLE/SCOOTER Link Vehicle No : BHARAT STAGE VI  
 Ownership : INDIVIDUAL Norms :  
 Maker's Name : HERO MOTOCORP LTD  
 Front HSRP No : AA2052979949 Rear HSRP No : AA2052758051  
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 04/2022  
 No of Cylinders : 1 Chassis No : MBLHAW124NHD70186  
 Engine No : HA11EDNHD02304 Fuel : PETROL  
 Horse Power(BHP) : 7.91 Cubic Capacity : 97 20  
 Maker's Classification : SPLENDOR+ BLACK AND AC Wheel base : 1236  
 CENTSS :  
 Seating Cap(in all) : 2 Standing Cap : 0  
 Sleepar Cap : 0 Unladen Wt (kgs) : 112  
 Colour : BLACK AND ACCENT 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. 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 : 18-Apr-2022 Sale Amt : 70640/-  
 OTT Date : 18-Apr-2022 Amount/Rcpt No : 7064 / UP31D22040003714  
 TaxUpTo : One Time Vehicle Is Govt./ Pvt. : PRIVATE  
 Tax Exempted or Not : NOT EXEMPTED Date of Approval : 25-Apr-2022  
 Other State/Transfer/Conversion Details :  
 Previous Owner :  
 Old State :  
 Transfer Date :  
 This certificate is valid from 24-Apr-2022 to 23-Apr-2037  
 Previous RegNo :  
 Entry Date :  
 Conversion Date :

Signature of Registering Authority  
 Date: 28 May-2022

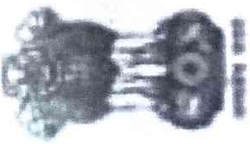
Seen for Bill

17/2/23

5/26/2022, 12:30 PM

3 of 20 N 2217371

Uttar Pradesh Government Uttar Pradesh Government Uttar Pradesh Go  
 Uttar Pradesh Government Uttar Pradesh Government Uttar Pradesh Go



भारत सरकार

GOVERNMENT OF INDIA



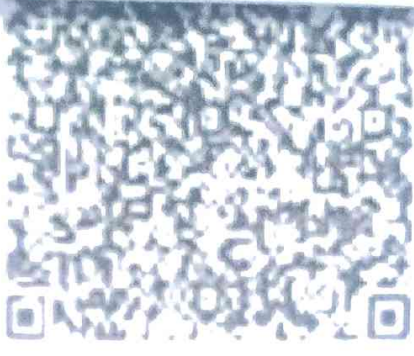
मंजय चक्रवर्ती

Sanjay Chakrawarti

जन्म तिथि/ DOB: 05/02/1996

पुरुष / MALE

3261 4486 4937



आधार-आम आदमी का अधिकार



**भारतीय विशिष्ट पहचान प्राधिकरण**  
**UNIQUE IDENTIFICATION AUTHORITY OF INDIA**

**पता:**

**S/O चन्द्रमाल, मोहल्ला-  
शिव कॉलोनी, लखीमपुर,  
खीरी,**

**उत्तर प्रदेश - 262701**

**Address**

**S/O Chandramal, Mohalla-shiv  
colony, Lakhimpur, Kheri  
Uttar Pradesh - 262701**



**1947**

**1800 300 1947**



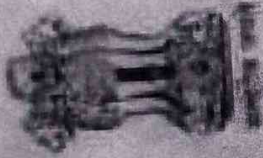
**help@uidai.gov.in**

**www.uidai.gov.in**

**WWW**

**P.O. Box No. 1947  
Bengaluru-560 001**

भारत सरकार  
GOVT. OF INDIA



आयकर विभाग  
INCOME TAX DEPARTMENT

स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card

**BNOPC8513L**



नाम / Name  
**SANJAY CHAKRAWARTI**

पिता का नाम / Father's Name  
**CHANDRA BHAL**

जन्म की तारीख / Date of Birth  
**05/02/1996**



**Sanjay Chakrawarti**

हस्ताक्षर / Signature

UP31 20130010371



LMV  
08/10/2013



MCWG  
08/10/2013



TRANS  
10/09/2018



Form 7 Rule 16(2)

Address

CHHAUCHH NAHAR COLONY  
LAKHIMPUR KHERI  
LAKHIMPUR.KHERI - 262701

Holder's Signature

जारीकर्ता / Issuing Authority Sign  
LAKHIMPUR KHERI

UNION OF INDIA Driving Licence (UP) (NT+T)

UP31 20130010371



Name

SURAJ KAYSHAP

Son/Daughter/Wife of

LALLU RAM

जारी की तारीख / Date of Issue

08/10/2013

जन्म तिथि / Date of Birth

17/07/1995

वैधता / Validity

09/09/2021

07/10/2033

Blood Group

Unknown

