

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-0426-62
 Customer Name ANUJ VERMA
 VIN MBLJFW589RGB00917
 Insurance Company
 HMCGL Card No 1073024510000771

Date 15-04-2026
 Contact No. 8808209492
 Model PLEASURE+ XTEC
 Reg No. UP31CD9576
 HMCGL Card Category Gold

S No	Part Number	HSN No.	Billing Type	Rate	Qty	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount
1	53205AALE20ES -COVER HANDLE FR (MATT NEXUS BLUE)	87141090	Paid	889.83	1	9.00	9.00	0.00	0.00	0.00	0.00	1,050.00
2	53208AAL510S -FR HANDLE COVER CHROME GARNISH	87141090	Paid	292.37	1	9.00	9.00	0.00	0.00	0.00	0.00	345.00
3	53175KTP900S -LEVER R STRG.HANDLE	87141090	Paid	79.66	1	9.00	9.00	0.00	0.00	0.00	0.00	94.00
4	53168AALD00S -HOUSING UND THROT	87141090	Paid	127.12	1	9.00	9.00	0.00	0.00	0.00	0.00	150.00
5	88110AALD01S -MIRROR ASSEMBLY RIGHT BACK	84831099	Paid	403.39	1	9.00	9.00	0.00	0.00	0.00	0.00	476.00
6	53140AALD00S -GRIP COMP THROT	84831099	Paid	51.69	1	9.00	9.00	0.00	0.00	0.00	0.00	60.99
7	64210AALE20VS -FRONT UPPER COVER	87141090	Paid	1,639.83	1	9.00	9.00	0.00	0.00	0.00	0.00	1,935.00
8	K86613AALG500S -KIT GARNISH RL BODY COVER	87141090	Paid	250.00	1	9.00	9.00	0.00	0.00	0.00	0.00	295.00
9	64350AAL900S -PILLON STEP COVER L SIDE	87141090	Paid	100.85	1	9.00	9.00	0.00	0.00	0.00	0.00	119.00
10	64305AALE20US -COVER FR LOWER J YELLOW YL BR 004M G	87141090	Paid	1,601.69	1	9.00	9.00	0.00	0.00	0.00	0.00	1,890.00
11	64330AALD20TS -COVER L FLOOR SIDE MAT BLACK NH 105	87141090	Paid	330.51	1	9.00	9.00	0.00	0.00	0.00	0.00	390.00
12	83450AALE20RS -R BODY COVER BLACK NH 1	87141090	Paid	1,190.68	1	9.00	9.00	0.00	0.00	0.00	0.00	1,405.00
13	18318AALD00S -PROTECTOR MUFFLER	87141090	Paid	694.92	1	9.00	9.00	0.00	0.00	0.00	0.00	820.00
14	33100AALE21S -LIGHT ASSY HEAD	85122010	Paid	2,644.07	1	9.00	9.00	0.00	0.00	0.00	0.00	3,120.00
15	61105AALE20VS -FRONT FENDER	87141090	Paid	1,097.46	1	9.00	9.00	0.00	0.00	0.00	0.00	1,295.00
16	53206AALD00S -COVER HANDLE RR	87141090	Paid	226.27	1	9.00	9.00	0.00	0.00	0.00	0.00	267.00
Parts Total											0.00	13,712.00

Labour Details

S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount	
Jobs Total											0.00	0.00
Parts Total											0.00	0.00
Labour Total												13,712.00
SGST (Parts) 9%												0.00
												1,045.83

CGST (Parts) 9%	1,045.83
Total	13,712.00

Rupees in Words: Thirteen Thousand Seven Hundred Eleven Only

Authorized 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

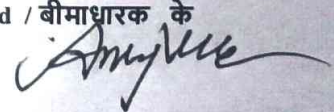
Subject / विषय : Claim Intimation Letter / दावा सूचना पत्र

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.	अनुज वर्मा, 8874552348
2	Vehicle No. / वाहन संख्या	UP31CD 9576
3	Policy No. / पालिसी संख्या	MS/2025/7001/0146575/427162
4	Period of Insurance / बीमा अवधि	16/04/2025 से 15/04/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	10/04/2026 7:00PM.
6	Place of Accident / दुर्घटना का स्थान	इन्दिरा मनोरंजन पार्क के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	अशीष कुमार वर्मा, 6393649589 UP31 20170006373.
8	Estimated Loss / अनुमानित हानि	
09.	Cause of Accident / दुर्घटना का कारण	इन्दिरा मनोरंजन पार्क के पास सामने से साइड से टक्कर हो गई जिससे मेरी गाड़ी लॉकी और गिस्कर सातेग्रस्त 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.	MASARAM AUTO SALES SRP ROAD, LAKHIMPUR KHERI, 9151154036

Date / दिनांक : 12/04/2026
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 16/04/2025 से 15/04/2026
 Claim No. 427162

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 : XINJI VERMA
 (b) Address for correspondence : RIO PYAREPUR, LAKHIMPUR, PO-KHERI, DIST-KHERI,
 (c) Telephone : 8874552348 UP, 262701.

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2024</u>	Engine No. <u>JF16WRG, B01113</u> Chassis No. <u>MBLJFW589RG1B00917</u>	Registration No. <u>UP31CD</u> <u>9576</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

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 : ASHISH KUMAR VERMA
 (b) Age : 24/06/1993
 (c) Address : R/O MO. PYAREPUR THANA - KOTWALI SADAK,
LAKHIMPUR-KHERI, 262701.
 (d) Is the Driver
 1. Owner : NO
 2. paid driver? : NO
 3. Owner's relative or friend? : BHAI
 (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 20170006373
 (h) Issuing Authority : 13/06/2017
 (i) Date of Expiry : 12/06/2037
 (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

5. DETAILS OF ACCIDENT

- (a) Date and Time : 10/04/2026 7:00 PM
 (b) Place : इंदिरा मंगेरुन पार्क के पास
 (c) Speed of vehicle at the time of accident : 30-40 km/h
 (d) Give a short description of the accident : इंदिरा मंगेरुन पार्क के पास के सामने से साइ से
टक्कर हो गई जिससे मेरी गाड़ी बायीं ओर गिरकर सतियस
 (e) If any third party was responsible for this accident give the name and address : होगई

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : FRONT AND RIGHT
 (b) Estimated cost of repairs : MASKAROM AUTO SALES, IIP ROAD
 (c) When and where can the damaged vehicle be inspected : LAKHIMPUR-KHERI, 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? : 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 Police 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 12/04/2006

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. UP31CD9576 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 Anuj Kumar
Occupation
Address

Bank Account Number
Name of the Bank

आयकर विभाग
INCOME TAX DEPARTMENT

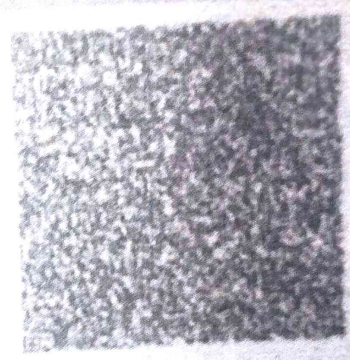


भारत सरकार
GOVT. OF INDIA



स्थायी खाता संख्या कार्ड
Permanent Account Number Card

BPZPV6406G



24122018

नाम
ANU VERMA

पिता का नाम / Father's Name
RISHI PAL VERMA

Anu Verma
हस्ताक्षर / Signature

पिन कोड
110005

GOVERNMENT OF UTTAR PRADESH

Transport Department LAKHIMPUR KHERI

FORM 23

CERTIFICATE OF REGISTRATION

Registration No : UP31CD9576 Registration Date : 22-Mar-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 : ANUJ VERMA Son/wife/daughter of : SRI PRITHVI PAL VERMA
Full Address: (Permanent) : R/O PYAREPUR, LAKHIMPUR KHERI, PS- KOTWALI, KHERI, UTTAR PRADESH-262701
Full Address: (Temporary) : R/O PYAREPUR, LAKHIMPUR KHERI, PS- KOTWALI, KHERI-UTTAR PRADESH-262701
Fitness Up To : 21-Mar-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 : AA1032441125 Rear HSRP No : AA1032584010
Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 02/2024
No of Cylinders : 1 Chassis No : MBLJFW589RGB00917
Engine No : JF16EWRGB01113 Fuel : PETROL
Horse Power(BHP) : 8.04 Cubic Capacity : 110.90
Maker's Classification : PLEASURE + ZX+ Wheel base : 1238
Seating Cap(in all) : 2 Standing Cap : 0
Sleepar Cap : 0 Unladen Wt (kgs) : 103
Colour : POLESTAR BLUE Laden/GV Wt (kgs) : 233
Other Criteria : AC Fitted : NO
Vehicle Purchase As : Fully Built

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

B / Manu. : 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. 18-Mar-2024.

Purchase dt : 18-Mar-2024

MT Date : 18-Mar-2024

Vehicle is Govt./ Pvt. : PRIVATE

Date of Approval : 30-Mar-2024

Other State/Transfer/Conversion/Reassign Details

Previous Owner

Old State

Transfer Date

Sale Amt : 78288/-

Amount/Rcpt No : 7829 / UP31D24030003744

Tax Exempted or Not : NOT EXEMPTED

Previous RegNo

Entry Date

Conversion Date

This certificate is valid from 22-Mar-2024 to 21-Mar-2039

Date : 03-Apr-2024 11:52:44

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority

Date 03-Apr-2024

72-1311

Motorsathi Care Private Limited

Bass Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India

Contact us at

Phone: +91 79410 50643

Email: care@motorsathi.com

Visit the help section of www.motorsathi.com

Name of Certificate Holder	Date of Birth	Mobile No.	Father/Husband Name	Make	Model
ANUJ VERMA	1995-01-01	8874552348	SRI PRITHVI PAL VERMA	Hero Motocorp	PLEASURE PLUS
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity
PLUS XTEC E20 MBK	UP31CD9576	JF16EWRGB01113	MBLJFW589RGB00917	2024	110
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Vehicle Type
60500.00	NA	0.00	0.00	0.00	FW
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Total ADV
	Soto	HERO FINCORP LTD.		2	60500.00
Address			City / District	Pin Code	Offered Payment (incl. GST)
R/O PYAREPUR LAKHIMPUR KHERI PS- KOTWALI Kheri				262701	1884.57
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
RAJ RANI VERMA	Female	50 Years	MOTHER	2025-04-16 11:22	Midnight of 2026-04-15

Section A, VRC: 809.91 TCR: 285.56 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST(A) 1095.47

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: 294.15 AHDC, DOC & Additional External Tyre Cover(AETC) Other Discount: 0.00 GST (CGST @9% + SGST @9%): 52.95 Total with GST(D): 347.10

Total(Section A+B+C+D) Offered Price After Discount: 1884.57

Package Period Covered	2025-04-16 To 2026-04-15	2026-04-16 To 2027-04-15	2027-04-16 To 2028-04-15	2028-04-16 To 2029-04-15	2029-04-16 To 2030-04-15
ADV	60500	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 2029-03-17 (DETAILS ARE 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: This scheme 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 a license under any law in force in India and that such a person satisfies the requirements of Rule 3 of the Motor Vehicle Act, 1988.

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 - 100000. Note: This package is based on limited breakup. Actual Costs and Terms & Conditions are in package document which can be downloaded only via authorized portal www.motorsathi.com or via customer care.

DISCLAIMER: This 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 water damage or other forceful external fact or non-co-operation of the coverage.

ANTI-MONEY LAUNDERING CLAUSE: In the event of a request under the package exceeding Rs. 1 lakh or a request for refund of payment exceeding Rs. 1 lakh, the account details will be shared with the police offices of AML package of the company. The AML package is available in all our operating offices as well as Company website.

FOR REGISTER REQUEST PLEASE CONTACT WITH MOTORSATHI CARE PVT LTD AT: Website: www.motorsathi.com Customer Care / Toll Free Phone No. +91-1079943



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 1884.58 ON 2025-04-16 from Mr./Ms. ANUJ VERMA against the ARN No. INCP00427162
 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

UP3120170006373

Issue Date
13/06/2017

Vi
12/06/2037

REPUBLIC OF INDIA Driving Licence

UP31 20170006373

13/06/2017

12/06/2037

24/06/1993

Unknown

ASHISH KUMAR VERMA

UPRAJIVDAI



Ashish

UP31 20170006373

LMV 13/06/2017

MCWG 13/06/2017

L P05342281MT



UP

Form 7 Rule 16(2)

Address
MOH PYAREPUR
THANA KOTWALI SADAR
LAKHIMPUR KHERI - 262701

Holder's Signature

Issuing Authority Sign
Lakhimpur Kheri

Details as on: 15/04/2025

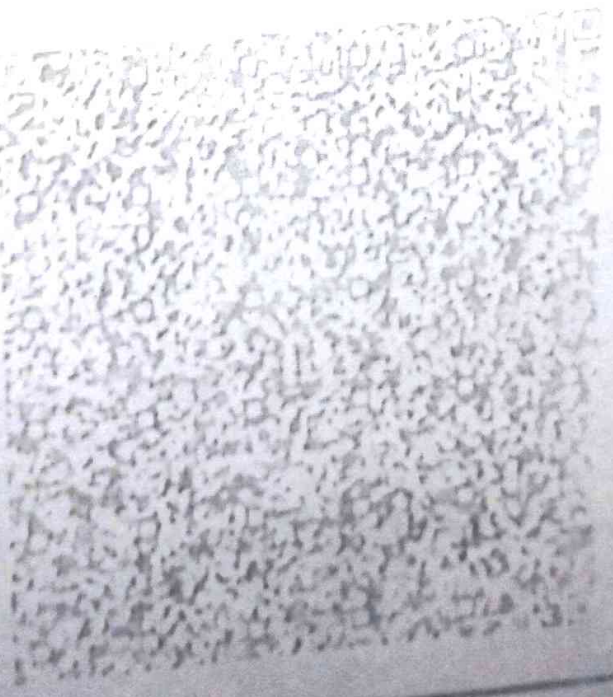
भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:

एन. प्रदीप गल्लानी, भारतीय विशिष्ट पहचान प्राधिकरण,
एन. प्रदीप - 202001

Address:

C/O Pradeep G. Galrani, Unique Identification Authority of India,
Pradeep, PIN-202001



8084 2427 4308

UID : 9115 3847 4038 6778

✉ help@uidai.gov.in

www.uidai.gov.in

1947