

## Program Proposal Two-Wheeler Package Contract - Bundled



Package Contract No.: MS/2026/7001/O/46575/570493

**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](http://www.motorsathi.com)

Name of Certificate Holder	Date of Birth	Mobile No.	Father/Husband Name	Make	Model	
NIRAJ KUMAR	1999-06-10	9305254652	RAMPAL	Hero Motocorp	XTREME 125	
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity	Vehicle Type
ABS	UP34CA4717	JA07AVRGM16341	MBLJAU024RGM14509	2025-02-18	125	TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV	
87000.00	NA	0.00	0.00	0.00	87000.00	
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Offered Payment (incl. GST)	
	Solo	SHRIRAM FINANCE LIMITED	---	2	2619.11	
Address			City / District	Pin Code	State	
LAKHUA BEHAD MUNSHI PURAWA, SITAPUR				261136	Uttar Pradesh	
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
RAMPAL	Male	46 Years	FATHER	2026-02-15 11:15	Midnight of 2027-02-14	

Section A, VRC: 1164.67 TCR: 513.30 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST(A) 1677.97

Section B, EC: 9.00 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: 423.00 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 76.14 Total with GST(D): 499.14

**Total(Section A+C+D) Offered Price After Discount: 2619**

Package Period Covered	2026-02-15 To 2027-02-14	2027-02-15 To 2028-02-14	2028-02-15 To 2029-02-14	2029-02-15 To 2030-02-14	2030-02-15 To 2031-02-14
ADV	87000	NIL	NIL	NIL	NIL
MS Services Period Covered (NGDL)	1 Year	NIL	NIL	NIL	NIL

\*THE VEHICLE COVERED IN THIS CONTRACT HAVE A VALID TP COVERAGE TAKEN FROM AN INSURANCE COMPANY VALID UPTO 2030-02-14 (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](http://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](http://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.



#: Received with Thanks Rs 2619.11 ON 2026-02-15 from Mr./Ms. NIRAJ KUMAR against the ARN No. INCP00570493  
 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 Sitapur

### FORM 23

#### CERTIFICATE OF REGISTRATION



Registration No : UP34CA4717 Registration Date : 18-Feb-2025  
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW  
 Dealer's Name & Address : AGARWAL AUTO SALES, EYE HOSPITAL ROAD, SITAPUR, , , 154-261001  
 Owner Name : NIRAJ KUMAR Son/wife/daughter of : RAMPAL  
 Full Address: (Permanent) : LAKHUA BEHAD MUNSHI PURAWA, , , SITAPUR, UTTAR PRADESH-261136  
 Full Address: (Temporary) : LAKHUA BEHAD MUNSHI PURAWA, , , SITAPUR-UTTAR PRADESH-261136  
 Validity Up To : 17-Feb-2040 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 Year HSRP No : AA1040077261  
 Front HSRP No : AA2121954007 Month/Year of Manuf. : 12/2024  
 Type of Body : SOLO WITH PILLION Chassis No : MBLJAU024RGM14509  
 No of Cylinders : 1 Fuel : PETROL  
 Engine No : JA07AVRGM16341 Cubic Capacity : 124.70  
 Horse Power(BHP) : 11.39 Wheel base : 1319  
 Maker's Classification : XTREME 125 R ABS Standing Cap : 0  
 Seating Cap(in all) : 2 Unladen Wt (kgs) : 137  
 Sleepar Cap : 0 Laden/GV Wt (kgs) : 267  
 Colour : BLACK AC Fitted : NO  
 Other Criteria : Fully Built Vehicle Purchase As

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

By Manuf.	Description	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 FINANCE LIMITED, R/O SITAPUR, , , Sitapur, Uttar Pradesh-261001 w.e.f. 15-Feb-2025.

Purchase dt : 15-Feb-2025 Sale Amt : 101439/-  
 OTT Date : 15-Feb-2025 Amount/Rcpt No : 10144 / UP34D25020003079  
 Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED  
 Date of Approval : 05-Mar-2025

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

This certificate is valid from 18-Feb-2025 to 17-Feb-2040

Date : 19-Mar-2025 11:38:41

Taxation Particulars / Advance Registration Mark Fee Details

Registering Authority  
 Signature of Registering Authority  
 Date : 19-Mar-2025

**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-0426-70	Date	16-04-2026
Customer Name	NIRAJ KUMAR	Contact No.	7696887823
VIN	MBLJAU024RGM14509	Model	XTREME 125R
Insurance Company		Reg No.	UP34CA4717
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	61322ACL000HS -FRONT COWL RIGHT - (RD(BR)-021P (G)	87141090	Paid	317.80	1	9.00	9.00	0.00	0.00	0.00	0.00	375.00
2	61323ACL000HS -FRONT COWL LEFT - (RD(BR)-021P (G)	87141090	Paid	272.88	1	9.00	9.00	0.00	0.00	0.00	0.00	322.00
3	83402ACL000S -PANEL INNER	87141090	Paid	118.64	1	9.00	9.00	0.00	0.00	0.00	0.00	140.00
4	6110AAACL000GS -FRONT FENDER SUB ASSEMBLY (RD-013M)G	87141090	Paid	874.58	1	9.00	9.00	0.00	0.00	0.00	0.00	1,032.00
5	53175KSP900S -LEVER R STRG.HNDL.	87141090	Paid	105.93	1	9.00	9.00	0.00	0.00	0.00	0.00	125.00
6	K50508ACLA000S -Kit Engine Guard	87141090	Paid	366.95	1	9.00	9.00	0.00	0.00	0.00	0.00	433.00
7	83546ACL000DS -TANK COVER RIGHT SIDE NH-194M-U	87141090	Paid	269.49	1	9.00	9.00	0.00	0.00	0.00	0.00	318.00
8	17555ACL000AS -TANK COVER FRONT RIGHT BLACK NH1	87141090	Paid	648.31	1	9.00	9.00	0.00	0.00	0.00	0.00	765.00
9	83500ACL000AS -SIDE COVER BOX RIGHT NH-1	87141090	Paid	218.64	1	9.00	9.00	0.00	0.00	0.00	0.00	258.00
10	83100ACL000AS -COVER RIGHT SIDE BLACK NH-1	87141090	Paid	507.63	1	9.00	9.00	0.00	0.00	0.00	0.00	599.00
11	83549ACL000S -SIDE SHROUD INNER FRONT	87141090	Paid	211.86	1	9.00	9.00	0.00	0.00	0.00	0.00	250.00
12	83596ACL000S -SIDE COVER LOWER RIGHT	87141090	Paid	118.64	1	9.00	9.00	0.00	0.00	0.00	0.00	140.00
13	77350ACL000AS -COWL RIGHT SIDE BLACK NH-1	87141090	Paid	572.03	1	9.00	9.00	0.00	0.00	0.00	0.00	675.00
14	77360ACL000AS -COWL LEFT SIDE BLACK NH-1	87141090	Paid	488.14	1	9.00	9.00	0.00	0.00	0.00	0.00	576.01
15	77230ACL000AS -COWL CENTER REAR BLACK NH-1	87141090	Paid	97.46	1	9.00	9.00	0.00	0.00	0.00	0.00	115.00
16	77266ACL000S -COWL REAR UNDER	87141090	Paid	54.24	1	9.00	9.00	0.00	0.00	0.00	0.00	64.00
17	53100ACL000S -PIPE STEERING HANDLE	87141090	Paid	311.86	1	9.00	9.00	0.00	0.00	0.00	0.00	367.99
18	45251KSP861S -DISC FR. BRAKE	87141090	Paid	1,169.49	1	9.00	9.00	0.00	0.00	0.00	0.00	1,380.00
19	53200ACL000S -STEM COMPLETE STEERING	87141090	Paid	1,033.90	1	9.00	9.00	0.00	0.00	0.00	0.00	1,220.00
20	51410ABZ000S -PIPE COMP FR FORK	87141090	Paid	726.27	2	9.00	9.00	0.00	0.00	0.00	0.00	1,714.00
21	50460ACL000GS -GRIP REAR LEFT (RD-013M)G	87141090	Paid	585.59	1	9.00	9.00	0.00	0.00	0.00	0.00	691.00

22	50470ACL000CS -GRIP REAR REAR BL(BR)-022C(G)	87141090	Paid	554.24	1	9.00	9.00	0.00	0.00	0.00	0.00	654.00
											0.00	12,214.00
<b>Parts Total</b>												<b>0</b>

**Labour Details**

S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount	
1	102032 - ACCIDENTAL LABOUR-XTREME 125R	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	<b>2,000.10</b>

Parts Total	12,214.00
Labour Total	2,000.10
SGST (Parts) 9%	931.58
CGST (Parts) 9%	152.55
SGST (Labour) 9%	152.55
CGST (Labour) 9%	
<b>Total</b>	<b>14,214.10</b>

Authorised Signatory

Rupees in Words: Fourteen Thousand Two Hundred Fourteen and paise Ten Only

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.	NIRAJ KUMAR 9305254652
2	Vehicle No. / वाहन संख्या	UP 34 CA 4717
3	Policy No. / पालिसी संख्या	MS/2026/7001/0/4657S/570493.
4	Period of Insurance / बीमा अवधि	15/02/2026 से 14/02/2027 तक
5	Date of loss & Time / दुर्घटना का दिनांक & समय	14/04/2026 6:30 PM.
6	Place of Accident / दुर्घटना का स्थान	लखीमपूर के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	NIRAJ KUMAR 9305254652 UP 34 2026 0001789.
8	Estimated Loss / अनुमानित हानि	NO
09.	Cause of Accident / दुर्घटना का कारण :	लखीमपूर से लखीमपूर जा रहे थे तभी अचानक लखीमपूर के पास सामने गया आ जाने के कारण मुझे अचानक ट्रैक लगाना पड़ा जिससे मेरी गाड़ी अनियंत्रित होकर दायी ओर 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.	MOSARAM AUTO SALES L.R. Road Lakhimpur khari 9151154036.

Date / दिनांक : 15/04/2026.  
हस्ताक्षर

Signature of Insured / बीमाधारक के

नीरज कुमार



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. \_\_\_\_\_

Tel. No. \_\_\_\_\_

Period of Insurance MS/2026/7001/0/46578/570493  
 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 : NIRAJ KUMAR.  
 (b) Address for correspondence : MUNSHI PURAWA, LAKHVA BEHAD.  
 (c) Telephone : 9305254652.

2. THE INSURED VEHICLE

Make & Year <u>HERO / 2025.</u>	Engine No. <u>JA07AVRGM16344</u> Chassis No. <u>MBLJAV024RGM14509.</u>	Registration No. <u>UP34CA</u> <u>4717</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

/N/A.

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 : NIRAJ KUMAR.  
 (b) Age : 10-6-1996  
 (c) Address : MUNSHI PURWA LAKHWA BEHAR LAKHWA  
 (d) Is the Driver : BEHAD LAHARPUR SITAPUR UHAR PRADESH  
 1. Owner : yes  
 2. paid driver? : NO  
 3. Owner's relative or friend? : Self  
 (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 2026 000 1789.  
 (h) Issuing Authority : 07.3.2026  
 (i) Date of Expiry : 09.06.2039.  
 (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 : 14/04/2026.  
 (b) Place : लखुवा के पास  
 (c) Speed of vehicle at the time of accident : 80-90 kmh.  
 (d) Give a short description of the accident : अचानक लखुवा के पास  
 (e) If any third party was responsible for this accident give the name and address : साथ से जाय था जिन कारण मुझे अचानक ब्रेक लगाया पण जिससे मेरी गाड़ी अनियंत्रित होकर दई साइड वाइकल नालिगल हो गई।

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage : Event and Right.  
 (b) Estimated cost of repairs :  
 (c) When and where can the damaged vehicle be inspected : MOSARAM AUTO SALES LRP Road Lakhimpur

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? :
- (b) If yes, give full details :

No  
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? :

- (d) If yes, to which Police Station? :

- (e) Date and Diary No. :

/ N/A

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? :
- (h) Which Policy Station? :
- (i) C.R. diary Number :

/ N/A

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 15/04/2026 200

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. \_\_\_\_\_ 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 नीरज कुमार .....  
Occupation .....  
Address .....  
.....  
.....

Bank Account Number .....  
Name of the Bank .....

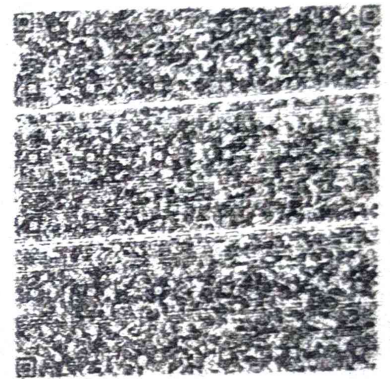
आयकर विभाग  
INCOME TAX DEPARTMENT

भारत सरकार  
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card

HKUPK7618R



नाम / Name  
NIRAJ KUMAR

पिता का नाम / Father's Name  
RAMPAL

जन्म की तारीख /  
Date of Birth  
10/05/1988

नीराज कुमार  
हस्ताक्षर / Signature

09082018



भारत सरकार  
Government of India



Aadhaar no. issued: 03/03/2015



नीरज कुमार  
Niraj Kumar  
जन्म तिथि/ DOB: 10/06/1999  
पुरुष

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).

6139 2518 8052

मेरा आधार, मेरी पहचान



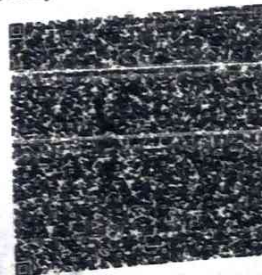
भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India



पता:  
आलय: रामपाल, मुंशी पुरवा, लखुवा बेहद, लखुवाबेहद,  
सिआपुर  
उत्तर प्रदेश - 261136

Address:  
S/O: Rampal, manshi purawa, Lakhua Behad, PO:  
Lakhwabehar, DIST: Sitapur,  
Uttar Pradesh - 261136

Details as on: 01/02/2025

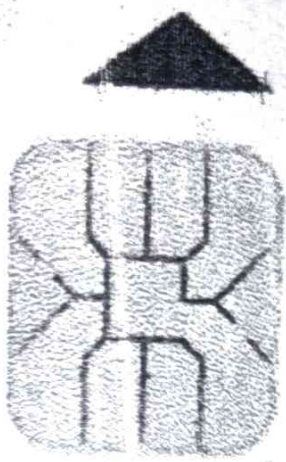


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Issued by Government of Uttar Pradesh

UP34 20260001789



Issue Date 07-03-2026

Validity (NT) 09-06-2039

Validity (TR)



Holder's Signature

Date of First Issue 07-03-2026

Name: NIRAJ KUMAR

Date of Birth: 10-06-1999 Blood Group:

Organ Donor: n

Son/Daughter/Wife of: RAMPAI

Address: MUNSHI PURAWA LAKHUWABEHAR LAKHUA BEHAD LAHARPUR  
SITAPUR UTTAR PRADESH 261136

**DL No: UP34 20260001789**

**DLUP0000254627**



**Invalid Carriages (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	UP34	07/03/2026	NT				
LMV	UP34	07/03/2026	NT				
MVSD							

**Emergency Contact Number**

  
**Licensing Authority**  
**UP34 - Sitapur**