





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. 252400/31/2025/25568

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

Period of Insurance 1+4 years

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 : Rekha  
 (b) Address for correspondence : \_\_\_\_\_  
 (c) Telephone : \_\_\_\_\_

2. THE INSURED VEHICLE

|                                 |  |  |
|---------------------------------|--|--|
| Make & Year<br><u>June 2024</u> | Engine No. <u>ECD 00R6E02588</u><br>Chassis No. - <u>MBLEW069R6E0</u><br><u>2839</u> | Registration No.<br><u>UP-32</u><br><u>PS-2334</u> |
|---------------------------------|--|--|

- (a) Was the vehicle in proper working condition?  
 (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

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 : MIA  
 (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 : \_\_\_\_\_

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : Rekha
- (b) Age : \_\_\_\_\_
- (c) Address : \_\_\_\_\_
- (d) Is the Driver :
  - 1. Owner : 010 Ranjeet Kumar 22 Near Sahasrangi
  - 2. paid driver? : SHIKAR Kendra Raitha Road Chaitarned - Kamalbad Badd
  - 3. Owner's relative or friend? : LKO
- (e) If paid driver, how long has he been in your employment : \_\_\_\_\_
- (f) Was he under the influence of intoxication Liquor or drugs? : \_\_\_\_\_
- (g) Driving Licence Number : UP-UI20130010972-
- (h) Issuing Authority : \_\_\_\_\_
- (i) Date of Expiry : 25-10-2029
- (j) Was the licence temporary/permanent : \_\_\_\_\_
- (k) Details of endorsement/suspension, if any : \_\_\_\_\_
- (l) Has he been involved in any accident before? : \_\_\_\_\_
- (m) Has he been charged by the policy? If so, Why? : \_\_\_\_\_

4. OTHER INSURANCE

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

5. DETAILS OF ACCIDENT

- (a) Date and Time : \_\_\_\_\_
- (b) Place : Medanta Hospital
- (c) Speed of vehicle at the time of accident : \_\_\_\_\_
- (d) Give a short description of the accident : \_\_\_\_\_
- (e) If any third party was responsible for this accident give the name and address : \_\_\_\_\_

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : 01292442 0842
- (b) Estimated cost of repairs : \_\_\_\_\_
- (c) When and where can the damaged vehicle be inspected : \_\_\_\_\_

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 : MIA
- (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? \_\_\_\_\_  
(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? \_\_\_\_\_ NIA  
(c) Was accident reported to Police? If not, Why? \_\_\_\_\_  
(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? \_\_\_\_\_ NIA  
(f) Has theft been reported to Police? \_\_\_\_\_  
(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 \_\_\_\_\_ 200

Signature of the insured Rekha

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 UP-32 PS-2334 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 ..... Rekha .....  
Occupation .....  
Address .....  
.....  
.....

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



GOVERNMENT OF UTTAR PRADESH

Transport Department TRANSPORT NAGAR RTO LUCKNOW (UP32)

FORM 23

CERTIFICATE OF REGISTRATION

Registration No : UP32PS2334 Registration Date : 04-Jul-2024  
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW  
 Dealer's Name & Address : MOSARAM BUSINESS AND SERVICES PRIVATED LIMITED, 101,SITAPUR RD,MANDION  
 POLICE STN, MOHIBULLAPUR, WARD FAIZULLAGANJ, , , 157-226021  
 Owner Name : REKHA Son/wife/daughter of : RANJEET KUMAR  
 Full Address: (Permanent) : NEAR SAHBHAGI SIKHSHA KENDRA, RAITHA ROAD CHHATHAMEEL, KAMALABAD  
 BARHAULI, LUCKNOW, UTTAR PRADESH-226201  
 Full Address: (Temporary) : NEAR SAHBHAGI SIKHSHA KENDRA, RAITHA ROAD CHHATHAMEEL, KAMALABAD  
 BARHAULI, LUCKNOW-UTTAR PRADESH-226201  
 Fitness UpTo : 03-Jul-2039 Owner Serial No : 1  
 Detailed Description  
 Class of Vehicle : M-CYCLE/SCOOTER Link Vehicle No :  
 Ownership : INDIVIDUAL Norms : Not Available  
 Maker's Name : HERO MOTOCORP LTD  
 Front HSRP No : AA2104091301 Rear HSRP No : AA2106032778  
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 05/2024  
 No of Cylinders : 0 Chassis No : MBLCEW009R6E02839  
 Motor No : ECD000R6E02588 Fuel : ELECTRIC(BOV)  
 Motor Wattage(kw) : 5.99 Cubic Capacity : 0.00  
 Maker's Classification : VIDA V1 PRO Wheel base : 1301  
 Seating Cap(in all) : 2 Standing Cap : 0  
 Sleeper Cap : 0 Unladen Wt (kgs) : 125  
 Colour : MATT ABRAX ORANGE Laden/GV Wt (kgs) : 275  
 Other Criteria : AC Fitted : NO  
 Vehicle Purchas+ 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 : 30-Jun-2024 Sale Amt : 168385/-  
 OTT Date : Amount/Rcpt No : /  
 Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED  
 Date of Approval : 27-Jul-2024

Other State/Transfer/Conversion/Reassign Details

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

This certificate is valid from 04-Jul-2024 to 03-Jul-2039

Date . 31-Jul-2024 15:21:11

taxation Particulars / Advance Registration Mark Fee Details

Signature of Registrar  
 04 Jul 2024

P 8366875

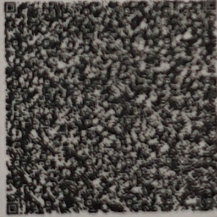


भारत सरकार  
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 2728/24223/01787

To  
रेखा  
Rekha  
C/O: Ranjeet Kumar,  
22,  
Near Sahbhagi Sikshan Kendra,  
Raitha Road, Chathameel,  
VTC: Kamalabad Barhaulti,  
PO: Kamalabad Badauli,  
Sub District: Bakshi Ka Talab,  
District: Lucknow,  
State: Uttar Pradesh,  
PIN Code: 226201,  
Mobile: 9161601106



Validity unknown  
Digitally signed by Unique Identification Authority of India  
Date: 2024.04.04 13:54  
GMT+05:30

आपका आधार क्रमांक / Your Aadhaar No. :

7242 2224 9926

VID : 9113 3886 9689 3669

मेरा आधार, मेरी पहचान



भारत सरकार  
Government of India



Aadhaar no. issued: 22/01/2012



रेखा  
Rekha  
जन्म तिथि/DOB: 06/04/1993  
महिला/ FEMALE

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).

7242 2224 9926

मेरा आधार, मेरी पहचान



Government of India



सूचना / INFORMATION

- आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। जन्मतिथि आधार नंबर धारक द्वारा प्रस्तुत सूचना और विनियमों में विनिर्दिष्ट जन्मतिथि के प्रमाण के दस्तावेज पर आधारित है।
- इस आधार पत्र को यूआईडीएआई द्वारा नियुक्त प्रमाणीकरण एजेंसी के जरिए ऑनलाइन प्रमाणीकरण के द्वारा सत्यापित किया जाना चाहिए या ऐप स्टोर में उपलब्ध एमआधार या आधार क्यूआर कोड स्कैनर ऐप से क्यूआर कोड को स्कैन करके या [www.uidai.gov.in](http://www.uidai.gov.in) पर उपलब्ध सुरक्षित क्यूआर कोड रीडर का उपयोग करके सत्यापित किया जाना चाहिए।
- आधार विशिष्ट और सुरक्षित है।
- पहचान और पते के समर्थन में दस्तावेजों को आधार के लिए नामांकन की तारीख से प्रत्येक 10 वर्ष में कम से कम एक बार आधार में अपडेट कराना चाहिए।
- आधार विभिन्न सरकारी और गैर-सरकारी फायदों/सेवाओं का लाभ लेने में सहायता करता है।
- आधार में अपना मोबाइल नंबर और ईमेल आईडी अपडेट रखें।
- आधार सेवाओं का लाभ लेने के लिए एमआधार ऐप डाउनलोड करें।
- आधार/बायोमेट्रिक्स का उपयोग न करने के समय सुरक्षा सुनिश्चित करने के लिए आधार/बायोमेट्रिक्स लॉक/अनलॉक सुविधा का उपयोग करें।
- आधार की मांग करने वाले सहमति लेने के लिए बाध्य हैं।
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on [www.uidai.gov.in](http://www.uidai.gov.in).
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.

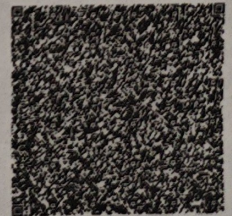


भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India



पता  
द्वारा: रंजीत कुमार, 22, सहभागी शिक्षण केंद्र के पास, रेखा  
रोड, छठामील, कमलाबाद बदांली, कमलाबाद बदांली,  
लखनऊ,  
उत्तर प्रदेश - 226201

Address:  
C/O: Ranjeet Kumar, 22, Near Sahbhagi  
Sikshan Kendra, Raitha Road, Chathameel,  
Kamalabad Barhaulti, PO: Kamalabad Badauli,  
DIST: Lucknow,  
Uttar Pradesh - 226201



7242 2224 9926

VID : 9113 3886 9689 3669

1947 | [help@uidai.gov.in](mailto:help@uidai.gov.in) | [www.uidai.gov.in](http://www.uidai.gov.in)

आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार

GOVT. OF INDIA



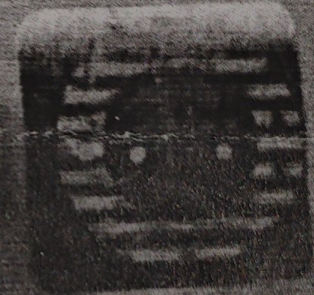
स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card

CRCPR4213D

नाम / Name  
REKHA

पिता का नाम / Father's Name  
MUL CHANDRA

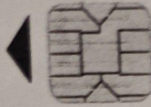
जन्म की तारीख / Date  
08/04/1993



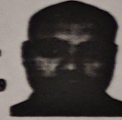


Indian Union Driving Licence  
Issued by Uttar Pradesh

UP41 20130010972



Issue Date Validity (NT) Validity (TR)\*  
21-10-2024 15-08-2033 25-10-2029



Holder's Signature

Date of First Issue 14.08.2013

Name: **RAJEEV KUMAR**  
 Date of Birth: **02-04-1989** Blood Group: **B+ VE** Organ Donor: **N**  
 Son/Daughter/Wife of: **LATE RAM KUMAR**  
 Address:  
**VILL-DEVARA KAROWA PO-SULEMABAD, P5-  
 BABAGANJ FATEHPUR, BARRA BANGU, UP 225302**

DL No: UP41 20130010972

UPDL000014408843



Invalid Carriage (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* |
|------------------|-------|-----------|---------------|------------------|---------------|--------------------|------------------|
| car              | MCWG  | UP41      | 16-08-2013    | NT               |               |                    |                  |
| car              | LMV   | UP41      | 16-08-2013    | NT               |               |                    |                  |
| car              | TRANS | UP41      | 26-10-2019    | TR               |               |                    |                  |
| MVSD             |       |           |               |                  |               |                    |                  |

Form 7 Rule 16(2)

Emergency Contact Number

Licensing Authority  
UP41 BABAGANJ