

Transport Department LAKHIMPUR KHERI

**ARAM AUTO SALES**  
 P.ROAD, LAKHIMPUR KHERI, LAKHIMPUR, KHERI, 262701, UP, INDIA  
 e Code: 9 Contact: 7800009643, 7408404715, 7408404714, 7800009644  
 TIN No: 09AAJFM3951B1ZD  
 Authorized Dealer: Hero MotoCorp Ltd.

ESTIMATE

Estimate No.	10730-03-REST-0526-103	Date	01-05-2026
Customer Name	RAMPAL...	Contact No.	8931092340
VIN	MBLHAW217PHE48601	Model	SPLENDOR+ XTEC
Insurance Company		Reg No.	UP31CB6961
HMCGL Card No	1073023800002398	HMCGL Card Category	Gold

S No	Part Number	HSN No.	Billing Type	Rate	Qty	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount
1	33100AAEC1099S -LIGHT ASSEMBLY HEAD	85122010	Paid	491.53	1	9.00	9.00	0.00	0.00	0.00	0.00	580.00
2	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
3	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
4	3345AKCC710S -WINKER ASSY L FR(W/O BULB)	85122010	Paid	177.97	1	9.00	9.00	0.00	0.00	0.00	0.00	210.00
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	53175AAFH00S -LEVER COMP.R STRG.HNDL.	87141090	Paid	84.75	1	9.00	9.00	0.00	0.00	0.00	0.00	100.00
7	88110AAEH31S -MIRROR ASSEMBLY RIGHT BACK	70091090	Paid	127.12	1	9.00	9.00	0.00	0.00	0.00	0.00	150.00
8	50803KST940S -GUARD LEG	87141090	Paid	563.56	1	9.00	9.00	0.00	0.00	0.00	0.00	665.00
9	53100AAE110S -PIPE STRG HANDLE	87141090	Paid	415.25	1	9.00	9.00	0.00	0.00	0.00	0.00	490.00
10	53200AAE300S -STEM COMP STRG	87141090	Paid	792.37	1	9.00	9.00	0.00	0.00	0.00	0.00	935.00
11	51410KWA941S -PIPE COMP. FR FORK	87141090	Paid	944.92	2	9.00	9.00	0.00	0.00	0.00	0.00	2,230.00
<b>Parts Total</b>											0.00	<b>6,805.00</b>

Labour Details

S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount	
1	102032 - ACCIDENTAL LABOUR-SPLENDOR+ XTEC	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	6,805.00
Labour Total	2,000.10
SGST (Parts) 9%	519.03
CGST (Parts) 9%	519.03
SGST (Labour) 9%	152.55
CGST (Labour) 9%	152.55
<b>Total</b>	<b>8,605.10</b>

Rupees in Words: Eight Thousand Eight Hundred Five and paise Ten Only

Authorised Signatory

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

10730 - Main W/S

To / सेवा में,  
The Oriental Insurance Co Ltd /  
दि ओरिएण्टल इन्सुरेंस 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.	रामपाल, 9889644243
2	Vehicle No. / वाहन संख्या	UP31CB6961
3	Policy No. / पालिसी संख्या	MS/2025/7001/0/46575/495912
4	Period of Insurance / बीमा अवधि	22/11/2025 से 21/11/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	26/04/2026 1:00AM
6	Place of Accident / दुर्घटना का स्थान	बर्ड के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	रामपाल, 9889644243 UP31 20090000701
8	Estimated Loss / अनुमानित हानि	
9	Cause of Accident / दुर्घटना का कारण	बर्ड के पास सामने से मोटर साइकिल से बाईं ओर से टक्कर मार दी जिससे मेरी गाड़ी दायीं ओर भेजकर क्षतिग्रस्त 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.	MOSARAM AUTO SALES, LRPROND LAKHSIMPUR-KHERI, 9151154036

Date / दिनांक :  
हस्ताक्षर

रामपाल  
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/2025/7001/0/46575/49591

Tel. No.

Period of Insurance 22/11/2025 to 21/11/2026

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 : RAMPAL  
 (b) Address for correspondence : PO RAMUAPUR TIKAULA, PO-BEJAM, DIST-KHERI,  
 (c) Telephone : 9889644243 UP-261501

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2023</u>	Engine No. <u>HAI1E7PHEA2065</u> Chassis No. <u>MBLHAN217PHE48601</u>	Registration No. <u>UP31CB</u> <u>6961</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 : RAM PAI  
 (b) Age : 01/10/1969  
 (c) Address : RTO RAMDIPUR PS-TPKAULA, LAKHIMPUR, KHERI, 261501  
 (d) Is the Driver  
 1. Owner : Yes  
 2. paid driver? : No  
 3. Owner's relative or friend? : No  
 (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 : UR31 20090000701  
 (h) Issuing Authority : 19/06/2024  
 (i) Date of Expiry : 18/06/2029  
 (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 : 26/04/2026 01:00AM  
 (b) Place : बस स्टैंड के पास  
 (c) Speed of vehicle at the time of accident : 35-40 km/h  
 (d) Give a short description of the accident : बस स्टैंड के पास सामने से बस और से मोटरसाइकिल से टकराई  
 (e) If any third party was responsible for this accident give the name and address : हमें पता नहीं है जिससे मरी जाई दीया और मारकर मरि जाई है

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : FRONT AND LEFT AND RIGHT  
 (b) Estimated cost of repairs : MOSARA M AUTO SALES, 2RPRDAD  
 (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? : N/A
- (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? : N/A
- (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 29/04/2006

Signature of the insured रामपाल

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 the loss and  
my/our motor Car/Vehicle No. UR31CB6961 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 रामपाल  
Occupation .....  
Address .....

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



GOVERNMENT OF UTTAR PRADESH  
Transport Department LAKHIMPUR KHERI  
FORM 23  
CERTIFICATE OF REGISTRATION

Registration No : UP31CB6961 Registration Date : 30-Sep-2023  
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 : RAMPAL Son/wife/daughter of : S/O SRI RAM VILAS  
Full Address: (Permanent) : R/O RAMUAPUR, TIKAULA KHERI, PS-NEEMGAON, KHERI, UTTAR PRADESH-261501  
Full Address: (Temporary) : R/O RAMUAPUR, TIKAULA KHERI, PS-NEEMGAON, KHERI-UTTAR PRADESH-261501  
Fitness UpTo : 29-Sep-2038 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 : AA2082722595 Rear HSRP No : AA2080467981  
Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 05/2023  
No of Cylinders : 1 Chassis No : MBLHAW217PHE48601  
Engine No : HA11E7PHEA2065 Fuel : PETROL  
Horse Power(BHP) : 7.91 Cubic Capacity : 97.20  
Maker's Classification : SPLENDOR+ XTEC (DRS) Wheel base : 1235  
Seating Cap(in all) : 2 Standing Cap : 0  
Sleepar Cap : 0 Unladen Wt (kgs) : 112  
Colour : BLACK SPARKING BLUE 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 : 29-Sep-2023 Sale Amt : 79861/-  
OTT Date : 29-Sep-2023 Amount/Rcpt No : 7987 / UP31D23090002187  
Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED  
Date of Approval : 03-Oct-2023

Other State/Transfer/Conversion Details

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

This certificate is valid from 30-Sep-2023 to 29-Sep-2038

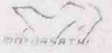
Date : 07-Oct-2023 11:05:05

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority  
Date : 07-Oct-2023

P 4639188

## Program Proposal Two-Wheeler Package Contract - Bundled



Package Contract No.: MS/2025/7001/O/46575/495912

**Motorsathi Care Private Limited**  
 D-27, Shastri Nagar, Meerut, Uttar Pradesh, (250004) India  
 Contact us at:  
 Phone: 017941050643  
 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	
RAMPAL	1965-01-01	9889644243	S/O SRI RAM VILAS	Hero Motocorp	SPLENDOR PLUS	
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity	Vehicle Type
DISK SELF	UP31CB6961	HA11E7PHEA2065	MBLHAW217PHE48601	2023	125	TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV	
52000.00	NA	0.00	0.00	0.00	52000.00	
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Offered Payment (incl. GST)	
LAKHIMPUR KHERI	Solo		---	2	1940.56	
Address			City / District	Pin Code	State	
R/O RAMUAPUR, TIKAULA KHERI, PS-NEEMGAON, KHERI			LAKHIMPUR KHERI	261501	Uttar Pradesh	
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
RAJNI DEVI	Female	37	WIFE	2025-11-22 12:46	Midnight of 2026-11-21	

Section A, VRC: 748.33 TCR: 429.52 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 **Total with GST(A): 1177.85**

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: 271.79 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 48.92 **Total with GST(D): 320.71**

**Total(Section A+B+C+D) Offered Price After Discount: 1941**

Package Period Covered	2025-11-22 To 2026-11-21	2026-11-22 To 2027-11-21	2027-11-22 To 2028-11-21	2028-11-22 To 2029-11-21	2029-11-22 To 2030-11-21
ADV	52000	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 2028-09-29 (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: Actual Costs and Terms & Conditions are in package document which can be downloaded only via authorized portal 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 1lakh, 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 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 of the courts at Meerut.



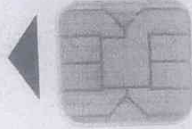
#: Received with Thanks Rs 1940.56 ON 2025-11-18 from Mr./Ms. RAMPAL against the ARN No. INCP00495912  
 The acknowledgement is subject to a compulsory excess of Rs. 100/- & Depreciation is applicable as per terms & conditions\*  
 (Please turn overleaf for details) Consolidated Stamp Duty Paid Endorsements: IMT - 22, 16, 18  
 Customer Service Address: D-27, Shastri Nagar, Meerut, Uttar Pradesh, (250004), India



**Indian Union Driving Licence  
Issued by Uttar Pradesh**

UP

**UP31 20090000701**



Issue Date    Validity (NT)    Validity (TR)\*  
19-06-2024    18-06-2029



Holder's Signature

Name: **RAMPAL**

Date of Birth: **01-01-1969**

Blood Group:

Organ Donor: **N**

Son/Daughter/Wife of: **RAM VILAS**

Address:

**RAMUAPUR POST TIKAULA  
LAKHIMPUR, KHERI 261501**

Date of First Issue: 04-06-2009

**DL No: UP31 20090000701**

UPDL 000013637578



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*
	MCWG	UP31	04-06-2009	NT			
	LMV	UP31	04-06-2009	NT			
	MVSD						

Form 7 Rule 16(2)

Emergency Contact Number

*Pankaj*  
Licensing Authority  
**UP31 LAKHIMPUR KHERI**



भारत सरकार  
Government of India



Aadhaar No. Issued: 21/03/2015



रामपाल  
Rampal  
जन्म तिथि/DOB: 01/01/1965  
पुरुष/ MALE

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).**

**5458 2146 2239**

**मेरा आधार, मेरी पहचान**



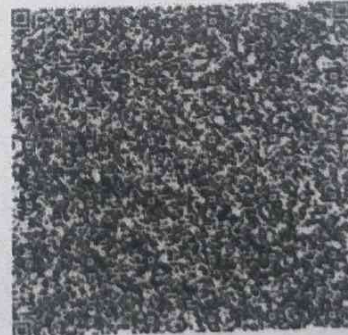
भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India



पता:  
आत्मज: राम विलास, रमूआपुर, टिकौला, बेहजम, खीरी,  
उत्तर प्रदेश - 261501

Address:  
S/O: Ram Vilas, ramuapur, Tikaula, PO:  
Behjam, DIST: Kheri,  
Uttar Pradesh - 261501

Details as on: 09/04/2024



**5458 2146 2239**

**VID : 9149 8073 5502 8732**



1947



help@uidai.gov.in



www.uidai.gov.in