

GANPATI AUTOMOBILES

Parwa Chauraha, Deoria
Mob. - 7704004711, 7704800558

ESTIMATE

Owner's Name SABITA YADAV
Address DEORIA
Phone 9082345534

Job No.
Date 22/03/2026
Chasis No.
Engine No.
Key No. UPS2BLW8730
Regn. No.
Speedmeter Redg.
Insurance No.
Model SPL + XTEC

Dear Sir,

Here Under we are forwarding our estimate for your acceptance, Please sign and return copy to us so that we may take up the work in hand.

S. No.	Details of Job	Qty.	Rate	Amount	
				Rs.	P.
1	Vigra -	15	1100	1100	
2	F. Fen deep -	15	1500	1500	
3	Liver - (R)	15	100	100	
4	Hamdl -	15	500	500	
5	Mittor - Imney -	15	302	303	
6	Mittor - Complete	15	3950	3950	
7	MIL	15	680	680	
8	F-Fork. L&R.	✓	—	550	
9					
10					
11					
12					
13					
14	W/BOUNT				
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
TOTAL				9483 ✓	

- Note:
1. If required, labour for above material shall be charged extra.
 2. Price of parts are subject to change without notice.
 3. VEHICLE DELIVERY AGAINST PAYMENT ONLY.
 4. All Disputes Subject to Deoria Jurisdiction only.

GANPATI AUTOMOBILES
Gorakhpur Road
For - GANPATI DEORIA
Mob. 7704004711

I/We agree with the conditions and approve the estimate.

Customer's Signature.....

Authorised Signatory

To / सेवा में,
The Oriental Insurance Co Ltd /
दि ओरिएण्टल इश्योरेंस कंपनी लिमिटेड

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.	SABITA YADAV :- 9082345594
2	Vehicle No. / वाहन संख्या	UP52BW8730,
3	Policy No. / पालिसी संख्या	MS/2025/7001/0/46575/455510
4	Period of Insurance / बीमा अवधि	15/07/2025 - To - 14/07/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	19/05/2026. Time:- 12:30pm.
6	Place of Accident / दुर्घटना का स्थान	शिमपुर के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	SHAILESH YADAV. UP5220230005/95, 9082345594
8	Estimated Loss / अनुमानित हानि	9483/-
09.	Cause of Accident / दुर्घटना का कारण :	शिमपुर द्वार से निकलते जा रहे थे रास्ते में शिमपुर के पास सड़क पे यात्रा से कुन्ता आ गयी जिसको हत्या के चक्कर में गरी जाड़ी दाया हाई गीट पर अट्रिब्यूट हो गयी। गाड़ी ड्राइवर - मल्लिकार्जुन शिवाजी
10	Spot Survey / स्पॉट सर्वे / स्पॉट सर्वेयर का नाम	NA
11	Third Party Loss / तृतीय पक्ष हानि / FIR No.	NA
12	Name of the Workshop, Address & Contact No./ वर्कशॉप का नाम, पता & मोबाइल / फ़ोन नं.	JANAPATI AUTO. MOBILE. REPAIR

Date / दिनांक : 21/05/26
हस्ताक्षर

सविता यादव

Signature of Insured / बीमाधारक के
सविता यादव

3. DRIVER AT THE TIME OF ACCIDENT

(a) Name: SHAILESH YADAV
 (b) Age: 41/01/2004
 (c) Address: BHIMPUR ROAD (C.P.)
 (d) Is the Driver
 1 Owner
 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: UP5220230005195
 (h) Issuing Authority: _____
 (i) Date of Expiry: 31/12/2043
 (j) Was the licence temporary/permanent: PERMANENT
 (k) Details of endorsement/suspension, if any: N/A
 (l) Has he been involved in any accident before? N/A
 (m) Has he been charged by the policy? If so, Why? N/A

4. OTHER INSURANCE

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

5. DETAILS OF ACCIDENT

(a) Date and Time: 19/05/2026 Time 12:30
 (b) Place: गिमपुर
 (c) Speed of vehicle at the time of accident: गिमपुर के पास बाइक पे चमक रहे थे
 (d) Give a short description of the accident: बिस्कि के चमक के अचानक से मुझे गति पाया
 (e) If any third party was responsible for this accident give the name and address: ब्यान्स गार करे को अज्ञात है

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage: AS PER ESTIMATE
 (b) Estimated cost of repairs: 94834
 (c) When and where can the damaged vehicle be inspected: GANPATI ACRB. MOBILE @ 9834

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



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. MS/2025/7001/0/46575/455510

Tel. No. _____

Period of Insurance 15/07/2025-30-14/07/2026

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 : SABITA YADAV
 (b) Address for correspondence : BHIMPUR, DEORIA (U.P.)
 (c) Telephone : _____

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2023</u>	Engine No. <u>52207</u> Chassis No. <u>17890</u>	Registration No. <u>4P52BW</u> <u>8730</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? PERSONAL USE.
 (c) Was trailer attached? _____
 (d) If a Motor Cycle/scooter NA.
 1. Was a side-car attached NA.
 2. Was a pillion rider carried NA.

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 : _____
- NA



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 ..सतीश यादव.....
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank



8. INJURY TO DRIVER/OCCUPANT

- (a) Was driver/any occupant injured?
- (b) If yes, give full details

N/A

9. WITNESS

- (a) Give names and addresses of passengers/other witnesses, 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 Police 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 past or future accident shall be forfeited.

Date 21/05/2026

Signature of the insured

सविता यादव



GOVERNMENT OF UTTAR PRADESH

Transport Department DEORIA

FORM 23

CERTIFICATE OF REGISTRATION

Registration No : UP52BW8730 Registration Date : 19-Jul-2023
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : GANPATI AUTOMOBILES (D), PURWA CHAURAHA GKP ROAD, DEORIA, .. 190-274001
 Owner Name : SABITA YADAV Son/wife/daughter of : SUBASH YADAV
 Full Address: (Permanent) : VILL- BHIMPUR, PO- DEORIA, PS- DEORIA, DEORIA, UTTAR PRADESH-274001
 Full Address: (Temporary) : VILL- BHIMPUR, PO- DEORIA, PS- DEORIA, DEORIA-UTTAR PRADESH-274001
 Fitness UpTo : 18-Jul-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 : AA2078037297 Rear HSRP No : AA2078432018
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 05/2023
 No of Cylinders : 1 Chassis No : MBLHAW216PHE17890
 Engine No : HA11E7PHE52207 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
 Sleeper Cap : 0 Unladen Wt (kgs) : 112
 Colour : BLACK TORNADO GREY 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 SHRIRAM FINANCE LTD, DEORIA, .. Deoria, Uttar Pradesh-274001 w.e.f. 18-Jul-2023.

Purchase dt : 18-Jul-2023 Sale Amt : 79861/-
 OTT Date : 16-Jul-2023 Amount/Rcpt No : 7987 / UP52D23070001941
 Vehicle Is Govt/ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
 Date of Approval : 22-Jul-2023

Other State/Transfer/Conversion Details

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

This certificate is valid from 19-Jul-2023 to 18-Jul-2038

Date : 31-Jul-2023 14:43:57

Taxation Particulars / Advance Registration Mark Fee Details


 Signature of Registering Authority
 Date: 31-Jul-2023

P 3795280



Package Offer

2025-07-15

Mr./Ms. SABITA YADAV

VILL- BHIMPUR, PO- DEORIA, PS- DEORIA, Deoria, Uttar Pradesh, 274001
, Uttar Pradesh, 274001

Dear Mr./Ms. SABITA YADAV,

It is indeed our pleasure to bring you on-board. We value your support and contribution to our business, and we trust that your experience with our business will bring you the utmost satisfaction.

We shall be assisting you with all the necessary contact details and resources needed to effectively communicate with our business. Your offer details of the program are attached, please feel free to contact us if you have any comments or queries.

We are committed to delivering responsive and excellent service to all our customers. We are pleased to serve you with the highest quality Services. Our customer's satisfaction is the most important part of our business, and we work hard to ensure our customers feel valued and heard. With the help of our award-winning customer service team, we will ensure you receive real-time solutions and quality products every time.

In case you have to initiate a claim, please contact us at phone no: +91 7941050643 or email: info@motorsathi.com or visit our website at www.motorsathi.org or download Motorsathi app from play store for guidance from Motorsathi.

Mr./Ms. SABITA YADAV, thank you for again for choosing to do business with us. We are grateful for the opportunity to assist you and will work tirelessly to provide our services to you.

We can be reached everyday during 9AM to 7PM at:

Phone No: +91 7941050643

Email: info@motorsathi.com

Website: www.motorsathi.org

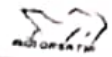
GSTIN: 09AAPCM5877M1ZD



Please scan the QR for details.



Program Proposal Two-Wheeler Package Contract - Bundled



Contract No.: MS2025-700103-46575/455510

MotorSathi Care Private Limited

B-1, DDA Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India

Contact us at:

Phone: +91 79410 50643

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
SABITA YADAV	2003-08-10	9082345594	SUBASH YADAV	Hero Motocorp	SPLENDOR PLUS
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity
SPL- XTEC E20	UP52BW8730	HAI1E7PHE52207	MBLJAW216PHE17890	2023	100
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Vehicle Type
51500.00	NA	0.00	0.00	0.00	TW
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Total ADV
	Solo			2	51500.00
Address			City / District	Pin Code	Offered Payment (Incl. GST)
VILL- BHIMPUR, PO- DEORIA, PS- DEORIA, Deoria, Uttar Pradesh, 274001				274001	1818.40
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
ANAND	Male	23 Years	BROTHER	2025-07-15 12:10	Midnight of 2026-07-14

Section A, VRC: 775.61 TCR: 425.39 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (10%): 0.00 Total with GST(A): 1201.00

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 M(T): 0.00 Total(B): 0.00 GST (CGST @9% + SGST @9%): 0.00 Total with GST(B): 0.00

Section C, MS Services(O): 241.53 MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @9% + SGST @9%): 43.47 Total MS Services with GST(C): 285.00

Section D, Drive Assure: 281.69 AHUC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 50.71 Total with GST(D): 332.40

Total(Section A+B+C+D) Offered Price After Discount: 1818

Package Period Covered	2025-07-15 To 2026-07-14	2026-07-15 To 2027-07-14	2027-07-15 To 2028-07-14	2028-07-15 To 2029-07-14	2029-07-15 To 2030-07-14
ADV	51500	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 2028-07-15 (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 Company's 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 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 1 lakh 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 MOTORSAATHI 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 to the exclusive jurisdiction of the courts at Aligarh.

Received with Thanks Rs 1818.40 ON 2025-07-15 from Mr./Ms. SABITA YADAV against the ARN No. INCP00455510

The acknowledgment 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-1, DDA Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001), India



भारत सरकार
Government of India



सविता यादव
Sabita Yadav
जन्म तिथि/DOB: 10/08/2003
महिला/ FEMALE



3875 8646 4391

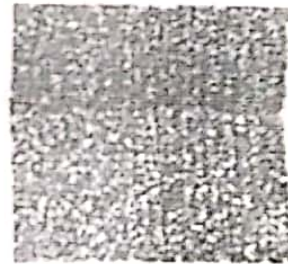
मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
आमजा: सुबाष यादव, ग्राम- भीमपुर, पोस्ट- देवरिया, भीमपुर,
देवरिया,
उत्तर प्रदेश - 274001

Address:
D/O: Subash Yadav, Gram- Bhimpur, Post-
Deoria, Bhimpur, Deoria,
Uttar Pradesh - 274001



3875 8646 4391

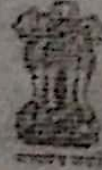


Phone: 011-2333 1000

www.uidai.gov.in



आयकर विभाग
INCOME TAX DEPARTMENT

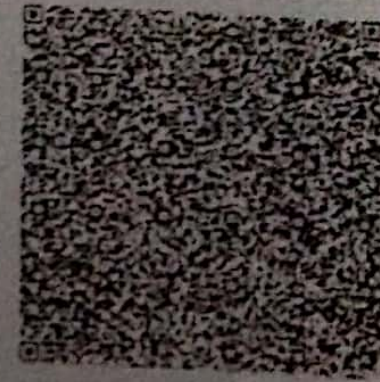


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

BRBPY5946G



नाम / Name
SABITA YADAV

पिता का नाम / Father's Name
SUBASH YADAV

जन्म की तारीख /
Date of Birth
10/08/2003

23092023

← PAN Application Digitally Signed, Card Not
Valid unless Physically Signed





Indian Union Driving Licence
Issued by Uttar Pradesh

UP52 20230005195

Issue Date Validity (NT) Validity (TR)
 31-03-2023 31-12-2043 _____



(31-03-2023)

Date of First Issue

Name: **SHAILESH YADAV**
 Date of Birth: **01-01-2004** Blood Group:
 Son/Daughter/Wife of: **RAMISVAR YADAV**

Organ Donor: **N**

Address:
BHIMPUR DEORIA Deoria, UP
274001

Holder's Signature

DL No: **UP52 20230005195**

UPDL 202004 100000110



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	UP52	31-01-2023	NT			
	LMV	UP52	31-03-2023	NT			
	MVSD						

Emergency Contact Number

[Signature]
 Licensing Authority
UP52 DEORIA

Form 7 (Rule 16(2))

Program Proposal Two-wheeler Package Contract - Bundled

Contract No.: MS/2025/7001/01/46575/455510



Motorsathi Care Private Limited

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

Contact us at:

Phone: +91 79410 50643

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
SABITA YADAV	2003-08-10	9082345594	SUBASH YADAV	Hero MotoCorp	SPLENDOR PLUS
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cable Capacity
SPL- XTEC E20	UP52BW8730	HA11E7PHE52207	MBLHAW216PHE17890	2023	100
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/BM Fuel ADV	Vehicle Tyre
51500.00	NA	0.00	0.00	0.00	1818.40
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Total ADV
	Solo			2	51500.00
Address			City / District	Pin Code	Offered Payment (Adv. Ct)
VILL- BHIMPUR, PO- DEORIA, PS- DEORIA, Deoria, Uttar Pradesh, 274001				274001	1818.40
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
ANAND	Male	23 Years	BROTHER	2025-07-15 12:10	Midnight of 2026-07-14

Section A, VRC: 775.61 TCR: 425.39 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%) 0.00 Total with GST(A): 1201.00

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 MCTP: 0.00 Total(B): 0.00 GST (CGST @9% + SGST @9%) (B): 0.00 Total GST(B): 0.00

Section C, MS Services(O): 241.53 MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @9% + SGST @9%) 43.47 Total MS Services with GST(C): 285.00

Section D, Drive Assure: 281.69 AHDC, DPC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%) 50.71 Total with GST(D): 332.40

Total(Section A+B+C+D) Offered Price After Discount: 1818

Package Period Covered	2025-07-15 To 2026-07-14	2026-07-15 To 2027-07-14	2027-07-15 To 2028-07-14	2028-07-15 To 2029-07-14	2029-07-15 To 2030
ADV	51500	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 2028-07-15 (DATE 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) 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 his 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 Central Motor Vehicle Rules, 1989.

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. 10000. 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 MotorSathi App.

DISCLAIMER: The package stands cancelled or void in the event of Cheque Dishonour. The company may cancel the package by sending 7 days' notice in case of 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 account 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. 79 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 may be denied 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.

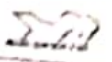
0: Received with Thanks Rs 1818.4 ON 2025-07-15 from Mr./Ms. SABITA YADAV against the ARN No. INCP00455510

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)

Program Proposal Two-Wheeler Package Contract - Bundled



Contract No.: MS/2025/7091/0446575/455510

MotorSathi Care Private Limited
 B-1, Dast Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001), India
 Contact us at:
 Phone: +91 79410 50643
 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
SABITA YADAV	2003-08-10	9082345594	SUBASH YADAV	Hero Motorcycle	SPLENDOR PLUS
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity
SPL - XTEC E20	UP52BW8730	HA11E7PHE52207	MBLJ1AW216PHE17890	2023	100
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Vehicle Type
51500.00	NA	0.00	0.00	0.00	100
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Total ADV
	Solo			2	51500.00
Address			City / District	Pin Code	Offered Payment (Incl. GST)
VILL- BHIMPUR, PO- DEORIA, PS- DEORIA, Deoria, Uttar Pradesh, 274001				274001	1818.40
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date
ANAND	Male	23 Years	BROTHER	2025-07-15 12:10	Midnight of 2026-07-14

Section A, VRC: 775.61 TCR: 425.39 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%) : 0.00 Total with GST(A): 1201.00
 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): 241.53 MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @9% + SGST @9%) : 41.47 Total MS Services with GST(C): 285.00
 Section D, Drive Assure: 281.69 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%) : 50.71 Total with GST(D): 112.40
Total (Section A+B+C+D) Offered Price After Discount: 1818

Package Period Covered	2025-07-15 To 2026-07-14	2026-07-15 To 2027-07-14	2027-07-15 To 2028-07-14	2028-07-15 To 2029-07-14	2029-07-15 To 2030-07-14
ADV	51500	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 2028-07-15 (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 Company's 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 & MotorSathi App.

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Involved with Thanks Rs 1818.40 ON 2025-07-15 from Mr./Ms. SABITA YADAV against the ARN No. INCP00455510
 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: INT - 22, 16, 18
Customer Service Address: B.Dast Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001), India