

17/06/2026
o / सेवा में,
The Oriental Insurance Co Ltd /
दि ओरिएण्टल इश्योरेंस कंपनी लिमिटेड

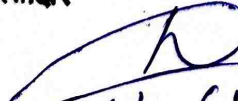
Subject / विषय : Claim Intimation Letter / दावा सूचना पत्र.

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.	Anu Mishra 9839864700
2	Vehicle No. / वाहन संख्या	UP32QU1821
3	Policy No. / पालिसी संख्या	252400/31/2026/26054
4	Period of Insurance / बीमा अवधि	3/7/2025 to 2/7/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	08/06/2026 (2:00 Pm)
6	Place of Accident / दुर्घटना का स्थान	Purania Lucknow
7	Name of the Driver, D.L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	Dinesh Tiwari UP 32A 20200007146
8	Estimated Loss / अनुमानित हानि	9361
09.	Cause of Accident / दुर्घटना का कारण :	Scooter turn ley wahi thi suddenly four wheeler aai ussey takna ke gaadi gin aur damaged ho gai.
10	Spot Survey / स्पॉट सर्वे / स्पॉट सर्वेयर का नाम	
11	Third Party Loss / तृतीय पक्ष हानि / FIR No.	
12	Name of the Workshop, Address & Contact No./ वर्कशॉप का नाम, पता & मोबाइल / फ़ोन नं.	Mosaram Bussiness services Pvt Ltd. 7081166066

Date / दिनांक : 17/06/2026
हस्ताक्षर


17/06/2026

Anu Mishra
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 _____

Certificate/Policy No. 252400/31/2026/26054

Tel. No. _____

Period of Insurance _____

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 : _____
 (b) Address for correspondence : _____
 (c) Telephone : _____

2. THE INSURED VEHICLE

Make & Year <u>2025</u>	Engine No. <u>MBLCEW048S6E02131</u> Chassis No. <u>ECDO0156E01743</u>	Registration No. <u>UP32QU1821</u>
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- (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 : _____
 (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 : Atharv Tiwari
(b) Age : 24
(c) Address : Prayadarshni Colony Near
(d) Is the Driver :
1. Owner :
2. paid driver? :
3. Owner's relative or friend? :
(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 : UP32A20200007146
(h) Issuing Authority :
(i) Date of Expiry : 21-08-2041
(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 : 4/06/2026 (2:00 pm)
(b) Place : Purania Lucknow
(c) Speed of vehicle at the time of accident : 20-40
(d) Give a short description of the accident :
(e) If any third party was responsible for this accident give the name and address :
Tuen late tym quhedes sudden aagai aur
accident ho gaya

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage : left side
(b) Estimated cost of repairs : 9361/-
(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 : N/A
(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 _____

N/A

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 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 part or future accident shall be forfeited.

Date 17/6/20026

Anu Mishra
Signature of the insured _____

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. UP32 QU 1821 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 Anu Mishra
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank



भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रमांक/ Enrolment No.: XXXX/XXXXX/XXXXX

Download Date: 25/08/2022

To
अनु मिश्रा
Anu Mishra
C/O Trilok Nath Mishra
naurangabad
Lakhimpur
Lakhimpur Kheri
Lakhimpur
Kheri Uttar Pradesh-262701

Issue Date: 25/10/2015

Signature Not Verified
Digitally signed by ANU MISHRA
UNIQUE IDENTIFICATION AUTHORITY OF INDIA
Date: 2022.08.25 16:05:42
IST



आपका आधार क्रमांक / Your Aadhaar No. :
XXXX XXXX 3954
मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



अनु मिश्रा
Anu Mishra
जन्म तिथि/DOB: 27/02/2000
महिला/ FEMALE

Issue Date: 25/10/2015

XXXX XXXX 3954

मेरा आधार, मेरी पहचान



Government of India



सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन ऑथेंटिकेशन से पहचान प्रमाणित करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- आधार देश भर में मान्य है।
- आधार कई सरकारी और गैर सरकारी सेवाओं को पाना आसान बनाता है।
- आधार में मोबाइल नंबर और ईमेल ID अपडेट रखें।
- आधार को अपने स्मार्ट फोन पर रखें, mAadhaar App के साथ।

- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता:
C/O त्रिलोक नाथ मिश्रा, नौरंगाबाद, लखीमपुर,
लखीमपुर खीरी, लखीमपुर, खीरी,
उत्तर प्रदेश, 262701

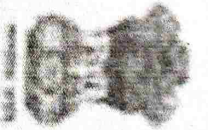
Address:
C/O Trilok Nath Mishra, naurangabad,
Lakhimpur, Lakhimpur Kheri, Lakhimpur,
Kheri,
Uttar Pradesh, 262701



XXXX XXXX 3954

आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



नाम / Name

ANNU MISHRA

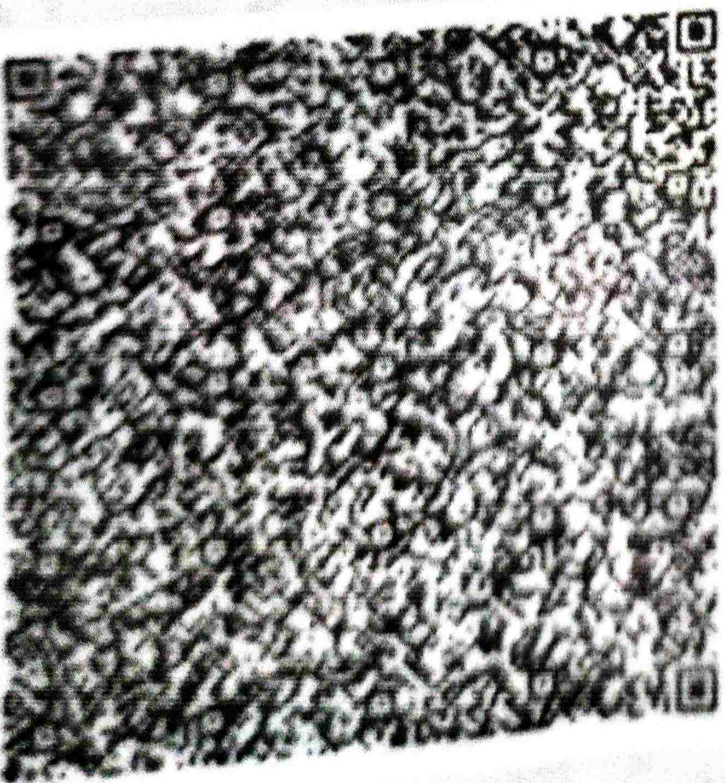
राज्य सेवा सेवा

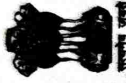
Permanent Account Number

GJFPM7473B

जन्म तिथि / Date of Birth

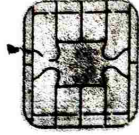
27/02/2000





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

UP32A20200007146



Issue Date **19-06-2020** Validity (NT) **21-08-2041**

Validity (TR) _____



Name:

ATHARV TIWARI

Date of Birth:

22-08-2001

Blood Group:

Organ Donor:

Son/Daughter/Wife of:

DINESH TIWARI

Address:

**3/81 PRIYADERSHAM COLONY NEAR SURBHI
SCHOOL LUCKNOW, UP 226020**

Holder's Signature

Date of First Issue **(19-06-2020)**

GOVERNMENT OF UTTAR PRADESH

Transport Department TRANSPORT NAGAR RTO LUCKNOW (UP32)
FORM 23

CERTIFICATE OF REGISTRATION



Registration No	: UP32QU1821	Registration Date	: 14-Jul-2025
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	Son/wife/daughter of	: D/O TRILOK NATH MISHRA
Owner Name	: ANU MISHRA	Full Address: (Permanent)	: NAURANGABAD, LAKHIMPUR, LAKHIMPUR KHERI, KHERI, UTTAR PRADESH-262701
Full Address: (Temporary)	: 3/80B P.D COLONEY, STP RD LKO, LUCKNOW, LUCKNOW-UTTAR PRADESH-226020	Owner Serial No	: 1
Fitness Up To	: 13-Jul-2040		
Detailed Description			
Class of Vehicle	: M CYCLE/SCOOTER	Link Vehicle No	: Not Available
Ownership	: INDIVIDUAL	Norms	
Maker's Name	: HETRO MOTOR CORP LTD	Rear HSRP No	: AA2123349910
Front HSRP No	: AA2120404786	Month/Year of Manuf.	: 05/2025
Type of Body	: SOLO WITH PILLION	Chassis No	: MBLCEW04856E02131
No of Cylinders	: 0	Fuel	: PURE EV
Engine No	: ECD00180801743	Cubic Capacity	: 0.00
Horse Power(SHP)	: 0.04	Wheel base	: 1301
Maker's Classification	: VIDA V2 PLUS	Standing Cap	: 0
Seating Cap(in all)	: 2	Unladen Wt (kgs)	: 124
Sleeper Cap	: 0	Laden/GV Wt (kgs)	: 274
Colour	: BLACK	AC Fitted	: NO
Other Criteria			
Vehicle Purchase As	: Fully Built		

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

By Manuf.	As Regd.	Weight(in kgs)
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- a) Front:
- b) Rear:
- c) Other:
- d) Tandem:

The motor vehicle above described is subject to Hypothecation in favour of ECOFY FINANCE PRIVATE LIMITED, WORLI, MUMBAI, . . . Mumbai, Maharashtra-400030 u.g.f. 03-Jul-2025.

Purchase dt	: 03-Jul-2025	Sale Amt	: 125000/-
OTT Date	:	Amount/Prop No	:
Vehicle is Govt/ Pvt.	: PRIVATE	Tax Exempted or Not	: NOT EXEMPTED
Date of Approval	: 19-Jul-2025		
Other State/Transfer/Conversion/Reassign Details		Previous RegNo	:
Previous Owner	:	Entry Date	:
Transfer Date	:	Conversion Date	:

This certificate is valid from 14-Jul-2025 to 13-Jul-2040



Registration Mark Fee Details

TAX INVOICE/CERTIFICATE CUM POLICY SCHEDULE

(FORM 51 OF THE CENTRAL MOTOR VEHICLES RULES, 1989)

DIVISIONAL OFFICE, 346 KHAIR NAGAR, OPP. FILMISTAN CINEMA MEERUT, 01214063570, (GSTIN: 09AAACT0627R4ZU)

Policy Type	BUNDLED POLICY (MOTORISED TWO WHEELERS-(5 Years))	Policy Issued On	03-JUL-25
Policy No	252400/31/2026/26054	Proposal No. & Date	R/252400/31/2026/10165551/1 & 03-JUL-2025
Agent/Broker Code	BA0000155144	Policy Period (OWN DAMAGE)	FROM 19:20 ON 03/07/2025 TO MIDNIGHT OF 02/07/2026
Agent/Broker Name	ABHINAV BHATTI	Policy Period (LIABILITY)	FROM 19:20 ON 03/07/2025 TO MIDNIGHT OF 02/07/2030
Insured Name	ANU MISHRA (GSTIN:)	Compulsory PA	FROM 19:20 ON 03/07/2025 TO MIDNIGHT OF 02/07/2026
Insured Address	C/O TRILOK NATH MISHRA, R O 3/80B, P.D. COLONEY, STP RD, L.K.O, LUCKNOW, , NA, 0	Lead / Breakin No	/
		Insured State	UTTAR PRADESH

INSURED MOTOR VEHICLE DETAILS		INSURED DECLARED VALUE (IDV) (in Rs.)	
Make	HERO	Vehicle	118750
Model & Variant	VIDA V2 PLUS	Electrical Accessories	0
Registration No	NEW	Non Electrical Accessories	0
Year Of Manufacture	2025	Total IDV	118750
Engine -Chassis No	ECD001S6E01743 - MBLCFW048S6E02131	IMF CONTRACT NO	
Cubic Capacity	6	Policy Type	Zone B - Rest of India
Seating Capacity	1 + 1	Geographical Area	
Type Of Body	SOLO	Type Of Fuel	BATTERY POWERED - ELECTRICAL

Schedule Of Premium (Amount in Rs.)

OWN DAMAGE SECTION(A)		LIABILITY SECTION (B)	
Vehicle	1990.25	Basic Third Party Liability	3273
Elec Accessories	0	Compulsory PA Cover Premium	360
Non-Elec Accessories	0	PA Cover for 0 Person Of Rs (0) each (IMT-16)	0
		Legal Liability (WC) to driver (IMT-28)	0
Basic Premium	179.25	Legal Liability to Employees (IMT-29)	0
Geographical Area Extn (IMT -1)	0	Legal Liability to Passenger (IMT-46)	NA
Driving Tuition Loading On OD Premium (60%)	0	Driving Tuition Loading On TP Premium (60%)	NA
Sub-Total Additions	0	PA Paid Driver, Conductor, Cleaner-GR36B3	3633
Deductibles		Net Liability Premium (B)	4109
Voluntary Deductibles (IMT 22A)	0	Total Premium (A+B)	740
Anti- Theft Device (IMT-10)	0	GST	0
AAI Membership (IMT-8)	0	SERVICE TAX	0.00
No Claim Bonus	0	STAMP DUTY	0
Discount for vehicle designed for handicapped	0	Swachh Bharat Cess@0.50%	0
SIP Discount	0	Krishi Kalyan Cess@0.50%	0
Sub -Total Deductibles	0	Gross Premium Paid	4849
Add-On Coverages			
NIL Depreciation	297		
Return to Invoice	0		
Key Replacement	0		
Consumables	297		
Sub Total Add-on Coverages	297		
Net own Damage Premium(A)	476		

Note:
 1. Policy Issuance is the subject to the realisation of cheque
 2. Consolidated Stamp Duty paid via Challan No
 3. The Policy is subject to a compulsory Deductible of Rs 0(IMT-22)
 4. Voluntary excess Rs(0)
 5. Subject to Endorsements IMT,7,10,28,

Nominee Details :	Nominee Name	Age	1	Relation	
Payment Details :	Payment Method	Cheque No./Transaction No.	Bank Name	Amount	4849
Financer Type	Financer Name	ECOFY FINANCE PRIVATE LIMITED	Financer Branch	LUCKNOW	
POS Name	POS ID	NA	POS PAN NO/Aadhar No	NA	

In the event of a claim under the policy exceeding Rs.1lac or a claim for refund of premium exceeding Rs.1lac, the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operating Offices as well as company's website.

The insurance under the policy is subject to conditions, clauses, warranties, exclusions, IMTs and OIC endorsements mentioned herein above which are available on company's website: www.orientalinsurance.org.in or on demand from the policy issuing office.
 We warrant that in case of dishonour of premium cheques the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).
 Claim is not admissible if driving License is found fake or is not valid whether or not in the Knowledge of the insured.
 I/We hereby certify that the policy to which the certificate relates as well as this certificate of insurance are issued in accordance with the provision of Chapter X and Chapter XI of Motor Vehicles Act, 1988.
 In witness whereof the undersigned being authorised by and on behalf of the company has/have herein to set his/their hands at 252400 on 03-JUL-25

IMPORTANT NOTICE
 The Insured 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 in order to comply with the MVA Act, 1988 is recoverable from the insured. See the clause headed "AVOIDANCE OF CERTAIN AND RIGHTS OF RECOVERY".

Limitations as to use: Use only for social domestic and pleasure purposes and the Insured's business. The Policy does not cover the use for : (1) Hire or reward (2) Carriage of goods (other than samples or personal luggage) (3) Organized racing (4) Pace Making (5) Speed testing (6) Reliability trials
 (7) Any Purpose in connection with motor trade.
Driver's Clause: Any person including the insured, 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 learner's license may also drive vehicle & that such a person satisfies the requirement of Rule 3 of the Central Motor Vehicles Rules, 1989
Limits of Liability Clause: Under section II-1 (i) of the policy - Death of or body injury. Such amount is necessary to meet the requirement of the motor vehicle act 1988. Under Section II-1 (ii) of the policy - Damage to third party property is Rs.7.5 lakhs P.A. Cover under section III for owner-Driver is RS 1500000
No Claim bonus: The insured is entitled for a No Claim Bonus (NCB) on the own damage section of the policy, if no claim is made or pending during the preceding year(s), as per the. The preceding year/20%, preceding two consecutive years/25%, preceding three consecutive years/35%, preceding five consecutive years/45%, preceding five consecutive years 50% of NCB on OD premium. No Claim bonus only be allowed provided the policy is renewed within 90 days of the previous policy
 I/We hereby certify that the policy to which this certificate relates as well as the certificate of insurance are issued in accordance with the provisions of chapter X and XI of M.V. Act, 1988.
 * This insurance excludes all pre existing damages

For and on behalf of
The Oriental Insurance Company Limited

Approved By : UNIV@252400
 Approved On : 03-JUL-25
 Place : MRT
 Printed On : 25-NOV-25

General Manager
 Authorized Signature

MOSARAM BUSINESS & SERVICES PVT LTDTHANA MADIION, NEAR ENGINEERING COLLEGE TANTA SQUARE, SITAPUR ROAD,LUCKNOW, LUCKNOW,
226024, UP, India

State Code: 9 Contact: 7408404728, , ,

GSTIN No: 09AAQCM8045C1Z7

Authorized Dealer: Hero MotoCorp Ltd.

ESTIMATE

Estimate No.	17011-03-REST-0626-10	Date	17-06-2026
Customer Name	ANU MISHRA	Contact No.	9839864700
Aadhaar Card	3954		
VIN	MBLCEW048S6E02131	Model	V2 PLUS
Insurance Company	THE ORIENTAL CLAIM	Reg No.	UP32QU1821
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	VD81131ACP000S -COVER INNER	87141090	Paid	483.90	1	9.00	9.00	0.00	0.00	0.00	0.00	571.00
2	VD64305ACP000YS - COVER FRONT LOWER LEFT (S(D)-015M(F))	87141090	Paid	1,449.15	1	9.00	9.00	0.00	0.00	0.00	0.00	1,710.00
Parts Total											0.00	2,281.00

Labour Details

S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount	
1	102032 - ACCIDENTAL LABOUR-V2 PLUS	998729	Paid	6,000.00	9.00	9.00	0.00	0.00	0.00	0.00	7,080.00	
Jobs Total											0.00	7,080.00

Parts Total	2,281.00
Labour Total	7,080.00
SGST (Parts) 9%	173.97
CGST (Parts) 9%	173.97
SGST (Labour) 9%	540.00
CGST (Labour) 9%	540.00
Total	9,361.00

Rupees in Words: Nine Thousand Three Hundred Sixty One 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

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 LUCKNOW Jurisdiction Only

17011 - Main W/S