





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

MS/2025/201/0/46525/40914

Div. Br. Office Address \_\_\_\_\_

Certificate/Policy No. \_\_\_\_\_

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

02/1/2025 To 01/02/2026

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

1. INSURED *kinhara*
- (a) Name : \_\_\_\_\_  
 (b) Address for correspondence : *Sunlight, near, Noida*  
 (c) Telephone : \_\_\_\_\_

2. THE INSURED VEHICLE

Make & Year <i>Hero</i>	Engine No. <i>H021 EDMHA51891</i> Chassis No. <i>MBCHAW121NHA42613</i>	Registration No. <i>UP-25-CA 1417</i>
----------------------------	---	--

- (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 : \_\_\_\_\_





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? : \_\_\_\_\_
- (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? : \_\_\_\_\_
- (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 10/12/2025 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 .....  
Occupation .....  
Address .....  
.....  
.....

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

GOVERNMENT OF UTTAR PRADESH

Transport Department MATHURA  
FORM 23  
CERTIFICATE OF REGISTRATION



9758598722

Registration No	: UP85CA1417	Registration Date	: 05-Feb-2022
Description of Vehicle	: M-CYCLE/SCOOTER	Purpose For Printing RC	: NEW
Owner's Name & Address	: JAIN MOTORCYCLE COMPANY, NEAR ALWAR BRIDGE NH-2, MATHURA, U.P., ...	Son/wife/daughter of	: MANAPAL
Owner Name	: KISHAN		
Address: (Permanent)	: SURIR VIJAU, MANT., MATHURA, UTTAR PRADESH-281205		
Address: (Temporary)	: SURIR VIJAU, MANT., MATHURA-UTTAR PRADESH-281205		
Fitness UpTo	: 04-Feb-2037	Tax UpTo	: One Time
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	Rear HSRP No	: AA2050047664
Front HSRP No	: AA2050346455	Month/Year of Manuf.	: 01/2022
Type of Body	: SOLO WITH PILLION	Chassis No	: MBLHAW121NHA42613
No of Cylinders	: 1	Fuel	: PETROL
Engine No	: HA11EDNHA51891	Cubic Capacity	: 97.20
Horse Power(BHP)	: 7.91	Wheel base	: 1236
Maker's Classification	: SPLENDOR+ BLACK AND AC CENTSS	Standing Cap	: 0
Seating Cap(in all)	: 2	Unladen Wt (kgs)	: 112
Side-par Cap	: 0	Laden/GV Wt (kgs)	: 242
Colour	: BLACK AND ACCENT	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	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	: 02-Feb-2022	Sale Amt	: 69600/-
OTR Date	: 02-Feb-2022	Amount/Rcpt No	: 6960 / UP85D22020000583
Tax UpTo	: One Time	Vehicle Is Govt./ Pvt.	: PRIVATE
Tax Exempted or Not	: NOT EXEMPTED	Date of Approval	: 22-Feb-2022
Other State/Transfer/Conversion Details		Previous RegNo	:
Previous Owner	:	Entry Date	:
State	:	Conversion Date	:
Transfer Date	:		

This certificate is valid from 05-Feb-2022 to 04-Feb-2037

Date : 26-Mar-2022 16:07:33

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority  
Date : 26-Mar-2022  
MATHURA

N 2164491

Uttar Pradesh Government Uttar Pradesh Government Uttar Pradesh Government Uttar Pradesh Government

## Two-Wheeler Package Contract

### MOTOR PACKAGE SCHEDULE MOTORIZED TWO WHEELERS PACKAGE-ZONE

Signer: Takshat Bhargava  
 Date: Thursday, Jan 30, 2025  
 03:37:27 IST  
 Location: Naurangabad, Aligarh  
 Reason: Signing

Group Package No: 2062/9022353/4168

Road Side Assistance included in this Package - Toll free No. 7941050643 \*Conditions Apply

Package No : MS/2025/7001/O/46575/400914 Cover Note No : Customer Code : CUSTINC00489677 Customer Name : KISHAN Address : MANAPAL SURIR VIJAU, MANT, Mathura, Uttar Pradesh, 281205 SURIR VIJAU, MANT, Mathura, Uttar Pradesh, 281205 Uttar Pradesh, 281205 Tel /Fax /Email : 9758598722/0/NA	Prev Package No : Cover Note Dt : Office Name : MEERUT (GSTIN:09AAACT0627R4ZU) Address : B.Dass Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh Uttar Pradesh, (202001) Tel /Fax /Email : 7941050643//info@motorsathi.com
---	--

Package Period (VEHICLE DAMAGE): FROM 15:37 ON 2025-02-02 TO MIDNIGHT OF 2026-02-01

Collection Date: 2025-01-30 00:00:00

Gross Payment : 732.67      GST : 131.88      Total : 864.55      GST INVOICE NO : 202501400914

Geographical Area : India      Area Extension :



**Particulars of Packaged Vehicle:**

Registration Mark	Engine No. & Chassis No. &	Make - Model	Year Of Registration	Type Of Body	Seating Capacity (incl)	Cubic Capacity
PS5CA1417	HA11EDNHA51891	SPLENDOR PLUS	2022-02-05	SOLO	1 + 1	100
	MBLHAW121NHA42613	13S ALL BLACK E20		PETROL		

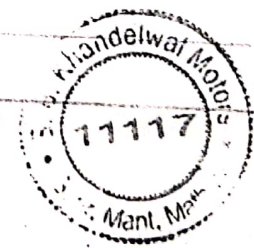
**Conditions as to use:**

The Package covers use only under a permit within the meaning of the Motor Vehicles Act 1988 or such a carriage falling under Sub-section 3 of section 66 of the Motor Vehicles Act 1988.

1. Use only for social, domestic and pleasure purposes and for the covered business or profession. The Package does not cover use for hire or reward, tuition, racing, pace making, reliability trial, speed testing, carriage of goods (other than samples or personal luggage) in connection with any trade or business or use for any purpose in connection with Motor Trade. Driver: Any person including the covered, 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 Vehicles Rules, 1989.

**This package excludes all pre-existing damages**

Packaged Declared Value



CE: 2025-01-30 00:00:00

# Program Proposal Two-Wheeler Package Contract - Bundled

Package Contract No.: MIS/2025/7001/O/46575/400914

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

Name of Certificate Holder	Date of Birth	Mobile No.	Father/Husband Name	Make	Model	
KISHAN	1965-01-01	9758598722	MANAPAL	Hero Motocorp	SPLENDOR PLUS	
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity	Vehicle Type
13S ALL BLACK E20	UP8SCA1417	HAI1EDNHA51891	MBLHAW121NHA42613	2022-02-05	100	TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV	
53000.00	NA	0.00	0.00	0.00	53000.00	
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Offered Payment (incl. GST)	
	Solo			2	1737.67	
Address			City / District	Pin Code	State	
SURUR VIJAU, MANT. Mathura, Uttar Pradesh, 281205				281205	Uttar Pradesh	
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
SHANKAR	Male	30 Years	SON	2025-02-02 15:37	Midnight of 2026-02-01	

Section A, VRC: 426.77 TCR: 437.78 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST(A) 864.55

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): 253.39 MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @9% + SGST @9%): 45.61 Total MS Services with GST(C): 299.00

Section D, Drive Assure: 486.54 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 87.58 Total with GST(D): 574.12

Package Period Covered	2025-02-02 To 2026-02-01	2026-02-02 To 2027-02-01	2027-02-02 To 2028-02-01	2028-02-02 To 2029-02-01	2029-02-02 To 2030-02-01
ADV	53000	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 2027-02-01 (DETAILS ARE PROVIDED BY THE CUSTOMER).

RESTRICTIONS 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 renewing 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/ Not exceeding 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.

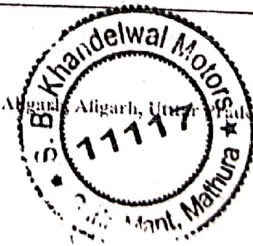
REGISTER REQUEST PLEASE CONNECT WITH MOTORSATHI CARE PVT LTD AT: Website: [www.motorsathi.com](http://www.motorsathi.com) Customer Care / Toll Free Phone No.: 79410506-4 Email: info@motorsathi.com



**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 1737.65 ON 2025-01-30 from Mr./Ms. KISHAN against the ARN No. INCP00400914. Acknowledgement is subject to a compulsory excess of Rs. 100/- & Depreciation is applicable as per terms & conditions\* (see 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), India





**UNION OF INDIA Driving Licence** (UP) (NT)

UP85 20170002785



जारी करने की तिथि  
Date of Issue  
01/03/2017


जन्म तिथि  
Date of Birth  
02/01/1998

नाम / Name  
**YOGESH KUMAR**

पिता/पति का नाम / Son/Daughter/Wife of  
**KISHAN SINGH**

वैधता / Validity  
(UP) 28/02/2037

Blood Group  
**UNKNOWN**



UP85 20170002785

LMV  
01/03/2017

MCWG  
01/03/2017

UP

Form 7 Rule 16(2)

UP03472234RS

पता / Address  
**SUREER  
MANT BLOC NAUJHEEL  
MATHURA**

जारीकर्ता / Issuing Authority Sign  
**MATHURA**

Holder's Signature



भारत सरकार  
Government of India



किशन  
Kishan  
जन्म तिथि / DOB : 01/01/1965  
पुरुष / Male



3272 0496 0692

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:  
S/O: मानपाल, सुरीर, सुरीर विजऊ,  
मथुरा, सुरीरकलां बांगर, सुरीर, मथुरा,  
उत्तर प्रदेश, 281205

Address:  
S/O: Manapal, surir, surir vijau,  
mathura, Surirkalan Bagar, Surir,  
Mathura, Uttar Pradesh, 281205

3272 0496 0692

1947  
1600 300 1947

help@uidai.gov.in

www.uidai.gov.in

