

ADITYA MOTORS

HATA ROAD, GAURI BAZAR, GAURI BAZAR, DEORIA, 274202, UP, India

State Code: 9 Contact: 7651881414, , ,

GSTIN No: 09CTBPM8181N1ZY

Authorized Representative of Dealer: Hero MotoCorp Ltd.

ESTIMATE

| | | | |
|-------------------|------------------------|---------------------|------------|
| Estimate No. | 66913-03-REST-1225-108 | Date | 12-12-2025 |
| Customer Name | UPENDRA KUMAR | Contact No. | 9838895087 |
| VIN | MBLHAW233RHA99747 | Model | SPLENDOR + |
| Insurance Company | | Reg No. | UP52BZ7176 |
| HMCGL Card No | 1115324530000692 | HMCGL Card Category | Platinum |

| S No | Part Number | HSN No. | Billing Type | Rate | Qty | SGST % | CGST % | UTGST % | IGST % | Discount % | Discount | Net Amount |
|-------------|---|----------|--------------|--------|-----|--------|--------|---------|--------|------------|----------|------------|
| 1 | 83410AAEC00XS -FRONT VISOR NH-1(T6) | 87141090 | Paid | 663.56 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 783.00 |
| 2 | 33400KCC710S -WINKER ASSY R FR | 85122010 | Paid | 186.44 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 220.00 |
| 3 | 50803KST940S -GUARD LEG | 87141090 | Paid | 527.12 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 622.00 |
| 4 | 61100ADH500RS -FENDER COMPLETE FRONT BLACK (TYPE-1) | 87141090 | Paid | 741.53 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 875.00 |
| 5 | 53100AAE110S -PIPE STRG HANDLE | 87141090 | Paid | 389.83 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 460.00 |
| 6 | 53175AAFH00S -LEVER COMP R STRG.HNDL | 87141090 | Paid | 77.97 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 92.00 |
| Parts Total | | | | | | | | | | | 0.00 | 3,052.00 |

Labour Details

| S No | Job Code | SAC No. | Billing Type | Rate | SGST % | CGST % | UTGST % | IGST % | Discount % | Discount | Net Amount | |
|------------|---------------------------------------|---------|--------------|--------|--------|--------|---------|--------|------------|----------|------------|--------|
| 1 | 102032 - ACCIDENTAL LABOUR-SPLENDOR + | 998729 | Paid | 300.00 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 354.00 | |
| Jobs Total | | | | | | | | | | | 0.00 | 354.00 |

| | |
|------------------|-----------------|
| Parts Total | 3,052.00 |
| Labour Total | 354.00 |
| SGST (Parts) 9% | 232.78 |
| CGST (Parts) 9% | 232.78 |
| SGST (Labour) 9% | 27.00 |
| CGST (Labour) 9% | 27.00 |
| Total | 3,406.00 |

Rupees in Words: Three Thousand Four Hundred Five Only

Authorised Signatory

66913 - Main W/S

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 DEORIA Jurisdiction Only

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. | UPENDRA KUMAR. 9838895087 |
| 2 | Vehicle No. / वाहन संख्या | UPS2BZ7176 |
| 3 | Policy No. / पालिसी संख्या | MS/2025/7001/0/46575/423779 |
| 4 | Period of Insurance / बीमा अवधि | 06/04/2025 To 05/04/2026 |
| 5 | Date of loss & Time / दुर्घटना का दिनांक & समय | 10/12/2025 06:20 PM. |
| 6 | Place of Accident / दुर्घटना का स्थान | खरोह चौरा चौरा |
| 7 | Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं | SATENDRA KUMAR UPS220150013036 9838895087 |
| 8 | Estimated Loss / अनुमानित हानि | 3406/- |
| 09. | Cause of Accident / दुर्घटना का कारण : | मेरे भाई सतेन्द्र कुमार मेरी गाड़ी लेके अपनी किसी नीजी कार्य करने के लिए चौरा चौरा गये थे। आवक आते समय खरोह पेट्रोल पंप से 100m पहले मेरी गाड़ी को अनपेक्षित नै पीढ़े से टक्कर मार दी जिससे छिड़ गाड़ी दायां साइड गिरकर क्षतिग्रस्त हुई। |
| 10 | Spot Survey / स्पॉट सर्वे / स्पॉट सर्वेयर का नाम | |
| 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. | ADITYA MOTARS GAURI BAZAR 8948395612 |

Date / दिनांक : 12/12/2025
हस्ताक्षर

Amg

उपेंद्र कुमार
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. MS/2025/7001/0/46575/

Tel. No. _____

Period of Insurance 06/04/2025 To 05/04/2026
 Claim No. 423779

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 : LIPENDRA KUMAR.
- (b) Address for correspondence : SIRSA NO3, PO- SIRSA N63
- (c) Telephone : _____

2. THE INSURED VEHICLE

| | | |
|---------------------------------|---|---|
| Make & Year <u>SPL+ 2024</u> | Engine No. <u>82973</u> Chassis No. <u>99747</u> | Registration No. <u>UP52 BZ</u> <u>7176</u> |
|---------------------------------|---|---|

- (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
 - 1. Was a side-car attached _____
 - 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

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : SATENDRA KUMAR.
- (b) Age : 41 / male
- (c) Address : STPSIA No-3 DEORIA.
- (d) Is the Driver :
 - 1. Owner : Brother
 - 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 : UPS2 201500/3036
- (h) Issuing Authority : Deoria, UP
- (i) Date of Expiry : 31/12/2033
- (j) Was the licence temporary/permanent : permanent
- (k) Details of endorsement/suspension, if any : NA
- (l) Has he been involved in any accident before? : NA
- (m) Has he been charged by the policy? If so, Why? : NA

4. OTHER INSURANCE

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

5. DETAILS OF ACCIDENT

- (a) Date and Time : 10/12/2025 06:20 PM
- (b) Place : खलिह चौकी चौक
- (c) Speed of vehicle at the time of accident :
- (d) Give a short description of the accident : पीछे से कार ने लगाना मार दी
- (e) If any third party was responsible for this accident give the name and address : 3406/-

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : Handle, Lever R, Winker R, Visor, fender
- (b) Estimated cost of repairs : Leg Guard etc
- (c) When and where can the damaged vehicle be inspected :

7. THIRD PARTY INJURY/PROPERTY DAMAGE

- (a) Name : NA
- (b) Address : NA
- (c) Full Details of personal injury sustained : NA
- (d) Name and address of any person/hospital giving medical attention to injured person : NA
- (e) Full details of property damaged : NA
- (f) Has notice of any claim been given to you? : NA

8. INJURY TO DRIVER/OCCUPANT

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

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 12/12/2005

Signature of the insured अपरा गुप्ता

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 अपेक्ष कुमारी
Occupation
Address
.....
.....

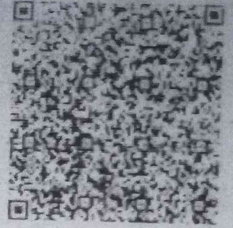
Bank Account Number
Name of the Bank

GOVERNMENT OF UTTAR PRADESH

Transport Department DEORIA

FORM 23

CERTIFICATE OF REGISTRATION



Registration No : UP52BZ7176 Registration Date : 11-Mar-2024
 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 : UPENDRA KUMAR Son/wife/daughter of : RAM AWADH
 Full Address (Permanent) : VILL SIRSIA, PO SIRSIA, DEORIA, , DEORIA, UTTAR PRADESH-274203
 Full Address (Temporary) : VILL SIRSIA, PO SIRSIA, DEORIA, , DEORIA-UTTAR PRADESH-274203
 Date of Issuance : 10-Mar-2024 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 MOTO CORP LTD
 Type of Motor Vehicle : AA2096543720 Rear HSRP No : AA2095488989
 Type of Motor Vehicle : SOLO WITH PILLION Month/Year of Manuf. : 01/2024
 Chassis No : MBLHAW233RHA99747
 Engine No : HA11E8RHA829/3 Fuel : PETROL
 Horse Power(BHP) : 7.91 Cubic Capacity : 97.20
 Maker's Classification : SPLENDOR+ (DRS) Wheel base : 1236
 Seating Cap(in all) : 2 Standing Cap : 0
 Max. Load : 0 Unladen Wt (kgs) : 109
 Colour : BLACK GREY STRIPE Laden/GV Wt (kgs) : 239
 AC Fitted : NO
 Vehicle Purchase Ac : Fully Built

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

| By Make | As Regd. | Description | 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 : 05-Mar-2024 Sale Amt : 74991/-
 Date of Sale : 05-Mar-2024 Amount/Rcpt No : 7500 / UP52D24030001387
 Vehicle is Govt./Pub. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
 Date of Approval : 10-Mar-2024

Owner State Transfer/Conversion/Reassign Details

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

This certificate is valid from 11-Mar-2024 to 10-Mar-2029

Signature of Registering Authority

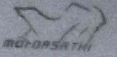


Date : 12-Apr-2024

Additional Particulars / Advance Registration Mark Fee Details

Program Proposal Two-Wheeler Package Contract - Bundled

Package Contract No. MS/2025/7001/O/46575/423779



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 | |
|----------------------------|-------------------|----------------------------------|---|---------------------|-----------------------------|--------------|
| UPENDRA KUMAR | 1988-07-15 | 9838895087 | S/O RAM AWADH | Hero Motocorp | SPLENDOR PLUS | |
| Sub Model | Vehicle Regn. No. | Engine No. | Chassis No. | Year of Mfg | Cubic Capacity | Vehicle Type |
| SILVER | UP52BZ7176 | HA11E8RHA82973 | MBLHAW233RHA99747 | 2024 | 100 | TW |
| Asset Declared Value (ADV) | Side Car ADV | Non-Electrical Accessories ADV | Electrical Accessories ADV | CNG/LPG/Bi-Fuel ADV | Total ADV | |
| 56500.00 | NA | 0.00 | 0.00 | 0.00 | 56500.00 | |
| 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 | 1347.19 | |
| Address | | | City / District | Pin Code | State | |
| Deoria, 274203 | | | | 274203 | Uttar Pradesh | |
| Nominee Name | Nominee Gender | Nominee Age | Nominee Relation | Package Start Date | Package End Date | |
| SEEMA | Female | 22 Years | WIFE | 2025-04-06 13:38 | Midnight of 2026-04-05 | |

Section A, VRC: 756.36 TCR: 266.68 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST(A) 1023.04
 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): 0.00 MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @9% + SGST @9%): 0.00 Total MS Services with GST(C): 0.00
 Section D, Drive Assure: 274.70 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 49.45 Total with GST(D): 324.15
Total(Section A+B+C+D) Offered Price After Discount: 1347

| Package Period Covered | 2025-04-06 To 2026-04-05 | 2026-04-06 To 2027-04-05 | 2027-04-06 To 2028-04-05 | 2028-04-06 To 2029-04-05 | 2029-04-06 To 2030-04-05 |
|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| ADV | 56500 | 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 2029-03-03 (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: 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.

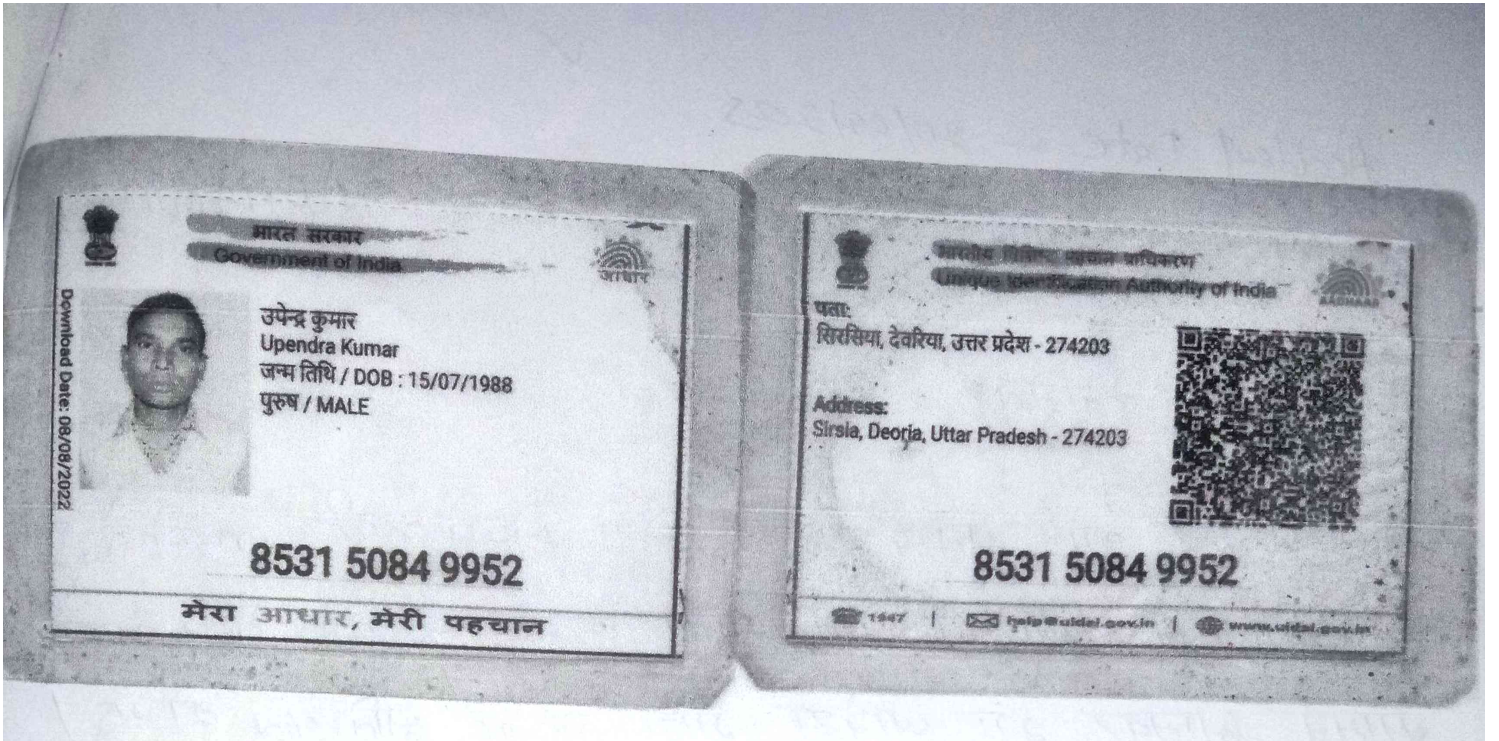
ANTI MONEY LAUNDERING CLAUSE: In the event of a request under the package exceeding Rs 1lakh or a request for refund of payment exceeding Rs 1 lakh, the accountability will comply with the provisions of AML package of the company. The AML package is available in all our operating offices as well as Company website.

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 to the exclusive jurisdiction of the courts at Aligarh.

#: Received with Thanks Rs 1347.2 ON 2025-04-06 from Mr./Ms. UPENDRA KUMAR against the ARN No. INCP00423779
 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), India



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

UP52 20150013036

जारी करने की तिथि / Date of Issue: 24/07/2015

वैधता / Validity: 31/12/2033

जन्म तिथि / Date of Birth: 01/01/1984

Blood Group: Unknown

नाम / Name: **SATENDRA KUMAR**

पिता/पति का नाम / Son/Daughter/Wife of: **RAM AWADH**





UP52 20150013036

UP02910089VT

LMV 24/07/2015

MCWG 24/07/2015

पता / Address: **SIRSIA NO-3
GAURI BAZAR
DEORIA**

UP

Form 7 Rule 16(2)

Holder's Signature

बतौर / Issuing Authority Sign: **DEORIA**

