

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.	Dhananjay Singh / 9407823976
2	Vehicle No. / वाहन संख्या	BR28 AH 13 24
3	Policy No. / पालिसी संख्या	2524001 31/2026/22732
4	Period of Insurance / बीमा अवधि	15/06/25 to 14/06/26
5	Date of loss & Time / दुर्घटना का दिनांक & समय	20/01/26 . 4:00 PM
6	Place of Accident / दुर्घटना का स्थान	Kuchikote
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	Prateef Singh / 9407823976 MP20N-2013-0074759
8	Estimated Loss / अनुमानित हानि	- 5612/-
09.	Cause of Accident / दुर्घटना का कारण : Ahar se Jankahi raj gite samay samne se aa rahi bike ne Jakkon mar je	
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.	Yash Automobiles. Salempur / 7897481257

Date / दिनांक : 21/01/26
हस्ताक्षर

Dhananjay Singh.
Signature of Insured / बीमाधारक के

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : Pradeep Singh
(b) Age : 35
(c) Address : Sol North Millonigunj - Thakur Mohalla.
(d) Is the Driver
1. Owner :
2. paid driver? :
3. Owner's relative or friend? : Son
(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 : MP-20A-2013-0074759
(h) Issuing Authority : Jabalpur
(i) Date of Expiry : 26-07-2033
(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 : 20/01/26 4:00 PM
(b) Place : Kuchaihat
(c) Speed of vehicle at the time of accident :
(d) Give a short description of the accident : Front end and right side
(e) If any third party was responsible for this accident give the name and address :

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : Ghar se darbhahi hai, jate samay samne
(b) Estimated cost of repairs : se ga rahi hai se stopan mar di 5612/-
(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 : NA
(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 _____

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. _____

NA

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 _____

NA

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 21/01/26 200

Signature of the insured Dharanjay Singh

Indian Union Vehicle Registration Certificate
 Issued by Government of Bihar



Regn No: BR28AH1324
 Date of Regn: 10-07-2025
 Regn. Validity: 09-07-2040
 Owner Serial: 1

Chasis No: MBLHAW235R9H53111
 Engine No: HA11E8R9H03062
 Owner Name: DHANANJAY SINGH
 Ownership: INDIVIDUAL

Son/Wife/Daughter of (In case of Individual Owner): MAINEJAR SINGH
 Address: VILL-CHAK HASNA, PO-SASAMUSA, PS-KUCHAIKOT, Gopalganj, BR, 841505

BR-R2809030269

Fuel: PETROL
 Emission Norms: BHARAT STAGE VI

Card Issue Date: 28-07-2025



Vehicle Class: M-Cycle/Scooter (2WN)

Regn. Number: BR28AH1324



Maker Name: HERO MOTOCORP LTD
 Model Name: SPLENDOR+ (DRS)
 Colour: BLACK GREY STRIPE / Body Type: SOLO WITH PILLION
 Seating (in all) / Standing / Sleeper Capacity: 2 / 0 / 0
 Month-Year of Mfg: 08 - 2024
 No. of Cylinders: 1
 Unladen / Laden / Gross Combination Weight (Kg): 109.00 / 239.00 / 0.00
 Cubic Cap. / Hairs: Power (BHP/Kw): 97.20 / 7.91
 Wheel Base (mm): 1234.00
 Financer Name: _____

Number of Axle: 1

BR-R2809030269

Nivedita Kumari
 Registration Authority
 DTO-GC PALGANJ





भारत सरकार

Government of India



धनंजय सिंह

Dhananjay Singh

जन्म तिथि/DOB: 01/01/1971

पुल/MALE



5125 2459 0134

मेरा आधार. मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:

S/O मैनेजर सिंह, चक हसना,
ससमुसा, गोपालगंज, ससमुसा विहार
81505


Address:


S/O. Maimejar Singh, Chak Hasna,
Sasamusa, Gopalganj,
Sasamusa, Bihar- 841505

5125 2459 0134



INDIAN UNION DRIVING LICENCE
MADHYA PRADESH STATE Form 7


 सत्यमेव जयते



Number : MP20M 2013 0074750
 Name : PRADEEP SINGH THAKUR
 S/DW of : MADANMOHAN SINGH THAKUR
 Address : 501 NORTH MILLONGUNI BANDH
 MOHALA NEAR LAL CHADUTRA
 JABALPUR, MP

Issued on: 27-02-2013
 DOB : 06-09-1991 BG:
 Is Licence to drive


Vehicle Class	MCWGR	LIVRY		
Date of Issue	27-02-2013	27-02-2013		


Valid till (Transport)
 Valid till (Non-Transport) 26-02-2033


HOLDER SIGNATURE
 Issuing Authority:
JABALPUR RTO

Auth. by: C S JAT

5311008003256033


 मध्य प्रदेश
परिवहन विभाग


 RTO Signature / Court Endorsement


 मध्य प्रदेश
परिवहन विभाग