

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. | Bhagwan Singh - |
| 2 | Vehicle No. / वाहन संख्या | UP05C20557 |
| 3 | Policy No. / पालिसी संख्या | 252400/31/2026/50499 |
| 4 | Period of Insurance / बीमा अवधि | 23-10-2025 - 22-10-2026 |
| 5 | Date of loss & Time / दुर्घटना का दिनांक & समय | 12-02-2026 07:30 AM |
| 6 | Place of Accident / दुर्घटना का स्थान | Managauhi Bajna |
| 7 | Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं | Ajay Kumar - UP0520220001243 |
| 8 | Estimated Loss / अनुमानित हानि | 12602 |
| 09. | Cause of Accident / दुर्घटना का कारण : | → मेरा बेटा काम पर जा रहा था तभी रास्ते में एक दुकान पर सामान लेने के लिए रुका तभी एक दम सामने से एक बार्डिक बाला बार्डिक में आगे से बार्डिक मार दी और मार कर भाग गया और बार्डिक राइट साइड जा गिरी ! |
| 10 | Spot Survey / स्पॉट सर्वे / स्पॉट सर्वेयर का नाम | N/A |
| 11 | Third Party Loss / तृतीय पक्ष हानि / FIR No. | N/A |
| 12 | Name of the Workshop, Address & Contact No./ वर्कशॉप का नाम, पता & मोबाइल / फ़ोन नं. | Durga Auto Nauhheel 7078936431 |

DURGA AUTO
Date / दिनांक : Bana Road, Ch. Mant
Near Nauhheel, Mathura-281203
हस्ताक्षर : Nauhheel, Mathura-281203
(M) 8445278025 / 9634181633

भगवानसिंह
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 Meerut

Certificate/Policy No. 252400/31/2026/50499

Tel. No.

Period of Insurance 23-10-2026-22-10-2026
 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 : Bhagwan Singh
 (b) Address for correspondence : Bhubika Bhubika Mathura - UP
 (c) Telephone :

2. THE INSURED VEHICLE

| | | |
|--|---|--|
| Make & Year <u>Hero motorcycle Ctel</u> | Engine No. Chassis No. <u>MA11F68HJ09369</u> <u>MBLHAW4758HJDB104</u> | Registration No. <u>UP05C2 0557</u> |
|--|---|--|

- (a) Was the vehicle in proper working condition? na
 (b) For what purpose was the vehicle being used at the time of accident? personal use
 (c) Was trailer attached? na
 (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 :
- N/A

3. DRIVER AT THE TIME OF ACCIDENT

(a) Name : AJay Kumar
(b) Age : 31
(c) Address : Bhurekha Mant Mathura - UP
(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 : N/A
(f) Was he under the influence of intoxication Liquor or drugs? :
(g) Driving Licence Number : UP0520220001243
(h) Issuing Authority : 23-10-2025
(i) Date of Expiry : 22-10-2026
(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 : 12-02-2026, 7:30 AM
(b) Place : Manggarhi, Bijnor
(c) Speed of vehicle at the time of accident : 00
(d) Give a short description of the accident :
(e) If any third party was responsible for this accident give the name and address :
मैरा बेटा काम पर जा रहा था तभी रास्ते में एक दुकान पर रुका सामान लेने के लिए रुका तभी एक दम सामने से एक बाइक वाला बाइक में।

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage : Front and Right
(b) Estimated cost of repairs : 12602
(c) When and where can the damaged vehicle be inspected : Durga Auto, Manjhiwal

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 Policy 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 13-02-2016 200

Signature of the insured

भवानसिंह

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. 500/-

अशोक सिंह

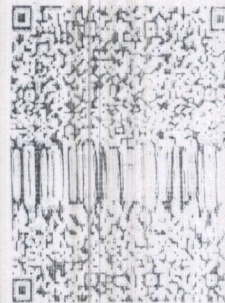
Witness
Name
Signature
Address

Signature
Occupation
Address
.....

Bank Account Number
Name of the Bank

GOVERNMENT OF UTTAR PRADESH

Transport Department MATHURA
FORM 23



CERTIFICATE OF REGISTRATION

Registration No : UP85CZ8557 Registration Date : 29-Oct-2025
Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
Dealer's Name & Address : JAIN MOTORCYCLE COMPANY, NEAR ALWAR BRIDGE NH-2, MATHURA, U.P., , 145-281004
Owner Name : BHAGAWAN SINGH Son/wife/daughter of : BANSHIDHAR
Full Address: (Permanent) : BHUREKA, BHOOREKA, , MATHURA, UTTAR PRADESH-281205
Full Address: (Temporary) : BHUREKA, BHOOREKA, , MATHURA-UTTAR PRADESH-281205
Fitness UpTo : 28-Oct-2040 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 : AA1046700473 Rear HSRP No : AA1046963043
Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 09/2025
No of Cylinders : 1 Chassis No : MBLHAW475SHJD3184
Engine No : HA11F6SHJ89369 Fuel : PETROL
Horse Power(BHP) : 8.17 Cubic Capacity : 97.20
Maker's Classification : SPLENDOR+ 01 EDITION (D Wheel base : 1235
RS)
Seating Cap(in all) : 2 Standing Cap : 0
Sleepar Cap : 0 Unladen Wt (kgs) : 113
Colour : MATT GREY Laden/GV Wt (kgs) : 243
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 LIMITED, MATHURA, , Mathura, Uttar Pradesh-281001 w.e.f. 23-Oct-2025.

| | | | |
|------------------------|---------------|---------------------|---------------------------|
| Purchase dt | : 23-Oct-2025 | Sale Amt | : 74999/- |
| OTT Date | : 23-Oct-2025 | Amount/Rcpt No | : 7500 / UP85D25100013715 |
| Vehicle is Govt./ Pvt. | : PRIVATE | Tax Exempted or Not | : NOT EXEMPTED |
| Date of Approval | : 18-Dec-2025 | | |

Other State/Transfer/Conversion/Reassign Details

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

This certificate is valid from 29-Oct-2025 to 28-Oct-2040

Date : 14-Jan-2026 18:21:49

Taxation Particulars / Advance Registration Mark Fee Details

Registrars Authority
Signature of Registrar
Motor Vehicle Dept.
Date : 14-Jan-2026
MATHURA

आयकर विभाग
INCOME TAX DEPARTMENT

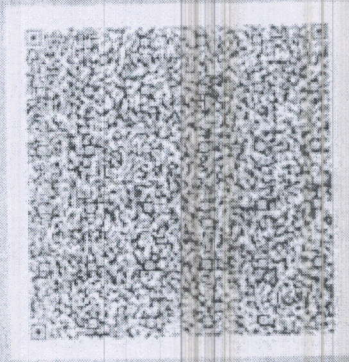


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

NHEPS2352M



नाम / Name
BHAGAWAN SINGH

पिता का नाम / Father's Name
BANSHIDHAR

जन्म की तारीख /
Date of Birth
01/01/1976

भगवान सिंह
हस्ताक्षर / Signature

06092020

भारत सरकार
Government of India

भगवान सिंह
Bhagawan Singh
जन्म तिथि / DOB - 01/01/1976
पुरुष / Male

7156 9227 3205

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
आत्मज: बंशीधर, भूरेका, मथुरा,
भूरेका, उत्तर प्रदेश, 281205

Address:
S/O: Banshidhar, Bhureka,
Mathura, Bhooreka, Uttar
Pradesh, 281205

7156 9227 3205

1947
1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

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

UP85 20220001243

Issue Date: 21-01-2022 Validity (NT): 19-10-2034 Validity (TR): _____


AJAY KUMAR
Date of Birth: 20-10-1994 Blood Group: _____
Son/Daughter/Wife of: **BHAGWAN SINGH**



Address: **BHUREKA
Mat. Mathura, UP
281205**

Holder's Signature: _____ Organ Donor: **N**

Date of First Issue: (21-01-2022)

DL No: UP85 20220001243 UPDL000007403871

 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 | UP85 | 21-01-2022 | NT | | | |
|  | LMV | UP85 | 21-01-2022 | NT | | | |
|  | MVSD | | | | | | |

Emergency Contact Number: _____

Bahits
Licensing Authority
UP85 MATHURA

Form 7 Rule 16(2)

DURGA AUTO

NEAR SBI BRANCH, BAJNA ROAD, NAUJHEEL, MATHURA, MATHURA, 281210, UP, India
 State Code: 9 Contact: 9634181633, , ,
 GSTIN No: 09AJSPN4601K2ZQ
 Associate Dealer: Hero MotoCorp Ltd.

ESTIMATE

| | | | |
|-------------------|--------------------------------|---------------------|------------|
| Estimate No. | 23791-02-REST-0226-73 | Date | 17-02-2026 |
| Customer Name | The Oriental Insurance Com LTD | Contact No. | 8859576878 |
| VIN | MBLHAW475SHJD3184 | Model | SPLENDOR + |
| Insurance Company | The Oriental Insurance Com LTD | Reg No. | UP85CZ8557 |
| HMCGL Card No | | HMCGL Card Category | |
| Part Details | | | |

| S No | Part Number | HSN No. | Billing Type | Rate | Qty | SGST % | CGST % | UTGST % | IGST % | Discount % | Discount | Net Amount |
|-------------|--|----------|--------------|----------|-----|--------|--------|---------|--------|------------|----------|------------|
| 1 | 17520ADH800CS -FUEL TANK MAT AXIS GRAY METALLIC | 87141090 | Paid | 5,233.90 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 6,176.00 |
| 2 | 53100AAE110S -PIPE STRG HANDLE | 87141090 | Paid | 389.83 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 460.00 |
| 3 | 50803KST940S -GUARD LEG | 87141090 | Paid | 527.12 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 622.00 |
| 4 | 61000ADH700CS -FRONT FENDER MAT AXIS GRAY METALLIC | 87141090 | Paid | 859.32 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 1,014.00 |
| 5 | 33100AAEC1099S -LIGHT ASSEMBLY HEAD | 85122010 | Paid | 453.39 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 535.00 |
| 6 | 83410ADH700CS -FRONT VISOR MAT AXIS GRAY METALLIC | 87141090 | Paid | 819.49 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 967.00 |
| 7 | 34901KSP910S -BULB HEAD LIGHT 12V-35/35W | 85392120 | Paid | 135.59 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 160.00 |
| 8 | 83402AAE710S -PANEL INNER | 87141090 | Paid | 236.44 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 279.00 |
| 9 | 61313KCC900S -STAY RIGHT HEADLIGHT | 87141090 | Paid | 34.75 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 41.00 |
| 10 | 61314AAE710S -STAY LEFT HEADLIGHT | 87141090 | Paid | 66.10 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 78.00 |
| 11 | K50506KCCA900RS -KIT STEP | 87141090 | Paid | 190.68 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 225.00 |
| 12 | 33400KCC710S -WINKER ASSY R FR | 85122010 | Paid | 186.44 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 220.00 |
| 13 | 88110AAEH31S -MIRROR ASSEMBLY RIGHT BACK | 70091090 | Paid | 118.64 | 1 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 140.00 |
| 14 | 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 | 11,009.00 |

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 | 650.00 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 767.00 | |
| 2 | 102046 - ADDITIONAL REPAIR CHARGES-SPLENDOR + | 998729 | Paid | 700.00 | 9.00 | 9.00 | 0.00 | 0.00 | 0.00 | 0.00 | 826.00 | |
| Jobs Total | | | | | | | | | | | 0.00 | 1,593.00 |

| | |
|-----------------|-----------|
| Parts Total | 11,009.00 |
| Labour Total | 1,593.00 |
| SGST (Parts) 9% | 839.67 |
| CGST (Parts) 9% | 839.67 |

| | |
|------------------|------------------|
| SGST (Labour) 9% | 121.50 |
| CGST (Labour) 9% | 121.50 |
| Total | 12,602.00 |

Rupees in Words: Twelve Thousand Six Hundred One Only

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 NAUJHEEL Jurisdiction Only

Authorised Signatory

DURGA AUTO
Near SBI Bajna Road, Teh. Mathura
Naujheel, Mathura - 281203
(M) 8445277500, 9634181633