

ESTIMATE

GSTN: 09AHWPG0569P1ZE

Gupta

AUTOMOBILES

AUTHORISED DEALER



Kasla Road, Chhawani, Padrauna (Kushinagar) ☎: 05564/245445, 9307236635

No. 3011

Date 13/04/26

Name Meerajuddin Mansuri

Add. UP57BY2957

S.NO.	PARTICULARS	QTY.	RATE	AMOUNT Rs.	P.
①	विशेष			1080/-	
②	H/L			3510/-	
③	धमक पेंडल			325/-	
④	Lever - (R)			105/-	
⑤	Foot Rest - (R)			265/-	
⑥	Handle			550/-	
⑦	Leg Guard			680/-	
⑧	metals			3910/-	
⑨	Labour charge			900/-	
TOTAL				11325	

Authorised Signatory

To / सेवा में,
The Oriental Insurance Co Ltd /
दि ओरिएण्टल इंश्योरेंस 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.	Mistajudalim Mamsuri, 7897794924
2	Vehicle No. / वाहन संख्या	UP57BY2957
3	Policy No. / पालिसी संख्या	252400/31/2026/20306
4	Period of Insurance / बीमा अवधि	04/06/2025 to 03/06/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	12/04/2026, 01.00 P.M.
6	Place of Accident / दुर्घटना का स्थान	Belahwa Tola
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	Vishal Kumar Tiwari 6306541712, UP5720240000950
8	Estimated Loss / अनुमानित हानि	11325/-
09.	Cause of Accident / दुर्घटना का कारण :	पड़ोस में रहने वाले विशाल कुमार तिवारी बर्क लेकर किसी काम से जा रहे थे तभी अचानक सामने वृत्ता आ गया उसी को बचाते हुये मेरी बर्क दाहिने स्लाईड गिरने से क्षतिग्रस्त हो गई।
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.	9125197148 Gupta automobile Pao Brauma

Date / दिनांक : 13/04/2026
हस्ताक्षर

Mistajudalim Mamsuri
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. 252400/31/2026/20306

Tel. No. _____

Period of Insurance 04/06/25 to 03/06/26
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 : Mesajuddin Manzuri
(b) Address for correspondence : _____
(c) Telephone : 7897794924

2. THE INSURED VEHICLE

Make & Year <u>Hesio/2025</u>	Engine No. <u>HAIIFBSHE23142</u> Chassis No. <u>MBLHAW335SHE22569</u>	Registration No. <u>UP57BY</u> <u>2957</u>
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- (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 No
1. Was a side-car attached No
2. Was a pillion rider carried No

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 : _____
- PIA

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : Vishal Kumar Tiwari
(b) Age :
(c) Address : Kushinagar Palsana.
(d) Is the Driver
1. Owner :
2. paid driver? :
3. Owner's relative or friend? : Friend
(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 : UP5720240000950
(h) Issuing Authority :
(i) Date of Expiry : 31/10/2040
(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 : 12/04/2026, 02.00 P.M.
(b) Place : Belahwa Tolla
(c) Speed of vehicle at the time of accident :
(d) Give a short description of the accident :
(e) If any third party was responsible for this accident give the name and address : कुते को बचाने के एकाकर में बाईक हमे साईड गिरने से डैमेज हो गई।

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : Front and Side
(b) Estimated cost of repairs : 11325/-
(c) When and where can the damaged vehicle be inspected : Gupta automobile Palsana

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 :
(e) Full details of property damaged :
(f) Has notice of any claim been given to you? :
N/A

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 *Misajulalim Mansuri*
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank



GOVERNMENT OF UTTAR PRADESH
 Transport Department PADRAUNA(KUSHI NAGAR)
 FORM 23
 CERTIFICATE OF REGISTRATION

http://vahan.parivahan.gov.in/vahan/v... Paper.



Registration No : UP57BY2957
 Description of Vehicle : M-CYCLE/SCOOTER
 Dealer's Name & Address : M/S VAISHNOVO MOTORS, 105, NH-28, GORAKHPUR ROAD, JHUGAWA KUSHINAGAR, 189-274403
 Owner Name : MERAJUDDIN MANSURI Son/wife/daughter of : ISLAM MANSURI
 Full Address: (Permanent) : VILL-EKAVANAHI URF BHAGAVATPUR, POST-JATAHA BAZAR, THANA-JATAHA BAZAR, KUSHINAGAR, UTTAR PRADESH-274304
 Full Address: (Temporary) : VILL-EKAVANAHI URF BHAGAVATPUR, POST-JATAHA BAZAR, THANA-JATAHA BAZAR, KUSHINAGAR-UTTAR PRADESH-274304
 Fitness UpTo : 08-Jun-2040
 Detailed Description :
 Class of Vehicle : M-CYCLE/SCOOTER
 Ownership : INDIVIDUAL
 Maker's Name : HERO MOTOCORP LTD
 Front HSRP No : AA1043239839
 Type of Body : SOLO WITH PILLION
 No of Cylinders : 1
 Engine No : HA11FBSHE23142
 Horse Power(BHP) : 8.17
 Maker's Classification : SPLENDOR+ XTEC 2.0 (DR S)
 Seating Cap(in all) : 2
 Sleeper Cap : 0
 Colour : Black Heavy Grey
 Other Criteria :
 Vehicle Purchase As : Fully Built
 Registration Date : 09-Jun-2025
 Purpose For Printing RC : NEW
 Owner Serial No : 1
 Link Vehicle No :
 Norms : BHARAT STAGE VI
 Rear HSRP No : AA1043058056
 Month/Year of Manuf. : 05/2025
 Chassis No : MBLHAW335SHE22569
 Fuel : PETROL
 Cubic Capacity : 97.20
 Wheel base : 1235
 Standing Cap : 0
 Unladen Wt (kgs) : 112
 Laden/GV Wt (kgs) : 242
 AC Fitted : NO

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 : 04-Jun-2025 Sale Amt : 86101/-
 OTT Date : 04-Jun-2025 Amount/Rcpt No : 8611 / UP57D25060001077
 Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
 Date of Approval : 19-Jun-2025

Other State/Transfer/Conversion/Reassign Details

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

This certificate is valid from 09-Jun-2025 to 08-Jun-2040

Date : 01-Jul-2025 14:26:49
 Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority
 Date : 01-Jul-2025

Q 3740283



The Oriental Insurance Company Ltd.
Policy Schedule

Report ID : PGIR0928

Page No: 1

Signer: RAJU KUMAR
Date: Wed, Jun 4, 2025
Position: Signing Officer

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 No: 252400/31/2026/20306
 Agent/Broker Code: BA0000155144
 Agent/Broker Name: ABHINAV BHATI
 Insured Name: MERAJUDDIN MANSURI (GSTIN:)
 Insured Address: CO ISLAM MANSURI VILL-EKAVANAHI URF BHAGAVATPUR, POST & THANA-JATAHA BAZAR, PADMAUNA KUSHINAGAR, N.A.

Policy Issued On: 04-JUN-25
 Proposal No. & Date: R/252400/31/2026/13878 & 04-JUN-2025
 Policy Period (OWN DAMAGE): FROM 14:38 ON 04/06/2025 TO MIDNIGHT OF 03/06/2026
 Policy Period (LIABILITY): FROM 14:38 ON 04/06/2025 TO MIDNIGHT OF 03/06/2030

Lead/Breakin No: [Blank]
 Insured State: UTTAR PRADESH

INSURED MOTOR VEHICLE DETAILS

Make: HERO MOTORCYCLE
 Model & Variant: HERO SPLENDOR PLUS NTECH E20
 Registration No: NLW
 Year Of Manufacture: 2025
 Engine Chassis No: HA11FBSHL23142 - MBLHAW335SHE22569
 Cubic Capacity: 100
 Seating Capacity: 1-1
 Type Of Body: SOLO
 Type Of Fuel: PETROL
 RTO Location: [Blank]

INSURED DECLARED VALUE (IDV) (in Rs.)

Vehicle	81796
Electrical Accessories	0
Non Electrical Accessories	0
Total IDV	81796
TMC CONTRACT NO	[Blank]
Policy Type	Zone B - Rest of India
Geographical Area	INDIA

Schedule Of Premium (Amount in Rs.)

OWN DAMAGE SECTION(A)		LIABILITY SECTION (B)	
Vehicle	1370.9	Basic Third Party Liability	3851
Elec Accessories	0	Compulsary PA Cover Premium	0
Non-Elec Accessories	0	PA Cover for 0 Person Of Rs (0) each (IMT-16)	0
Basic Premium	1288.9	Legal Liability (WC) to driver (IMT-28)	0
Geographical Area Extn (IMT -1)	0	Legal Liability to Employees (IMT-29)	0
Driving Tuition Loading On OD Premium (60%)	0	Legal Liability to Passenger (IMT-46)	NA
Sub-Total Additions	0	Driving Tuition Loading On TP Premium (60%)	NA
Deductibles	0	PA Paid Driver, Conductor, Cleaner-GR36B3	0
Voluntary Deductibles (IMT 22A)	0	Net Liability Premium (B)	3851
Anti Theft Device (IMT-10)	0	Total Premium (A+B)	4179
AAI Membership (IMT-8)	0	GST	752
No Claim Bonus	0	SERVICE TAX	0
Discount for vehicle designed for handicapped	0	STAMP DUTY	0.00
SIP Discount	1165	Swachh Bharat Cess@0.50%	0
Sub-Total Deductibles	1165	Krishi Kalyan Cess@0.50%	0
Add-On Coverages	204	Gross Premium Paid	4931
Net Depreciation	204		
Return to Invoice	0		
Key Replacement	0		
Consultables	0		
Sub-Total Add-on Coverages	204		
Net own Damage Premium(A)	328		

- 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	Relation
Payment Details:	Payment Method	Cheque No./Transaction No.	Bank Name
	POS Name	POS ID	POS PAN NO/Aadhar No
	NA	NA	NA
			Amount
			4931

In the event of a claim under the policy exceeding Rs.1lac or a claim for refund of premium exceeding Rs1lac, 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.

It is warranted that in case of dishonour of premium cheque(s) 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.

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 04-JUN-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 M.V. 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) Uninsured racing (4) Pace Making (5) Speed testing (6) Reliability trials

Use: For 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

Limit of Liability Clause: Under section II-11(a) of the policy -Death of or body injury. Such amount is necessary to meet there requirement of the motor vehicle act 1998. Under Section II-1 (ii) of the policy-Damage to third party is Rs. 5 Lakhs P.A. Cover under section III for owner-Driver is RS

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 years(s), as per the. The preceding year, 20%, preceding two 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

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, 1998

This insurance excludes all pre-existing damages



Approved By : 0595255MD
 Approved On : 04-JUN-25
 Place : [Blank]
 Printed On : [Blank]

शुभना कर्मिणी, राड़ी का पुल बीमा
 (50) एक साल का तथा चर्ड पार्टी बीमा
 पाँच साल के लिए ही मान्य है।



F. S. C. [Signature]

ESTIMATE

GSTN : 09AHWP0569P1ZE

AUTHORISED DEALER

Hero

Indian Union Driving Licence
Issued by Uttar Pradesh

UP57 20240000950



Issue Date 19-01-2024 Validity (NT) 31-10-2040 Validity (TR)*



Licence holder's Signature

Name: VISHAL KUMAR TIWARI

Date of Birth: 01-11-2000 Blood Group: O+ VE Organ Donor: N

Son/Daughter/Wife of: HOSILA TIWARI

Address:

Indian gals godam chhoti jataha Jungal
Jatha Kushnagar Uttar Pradesh 274304

Date of First Issue (19-01-2024)

DL No: UP57 20240000950

UPDL 0000-12805859



Invalid Carriage (Regn Numbers)*

Hazardous Validity* Hill Validity*

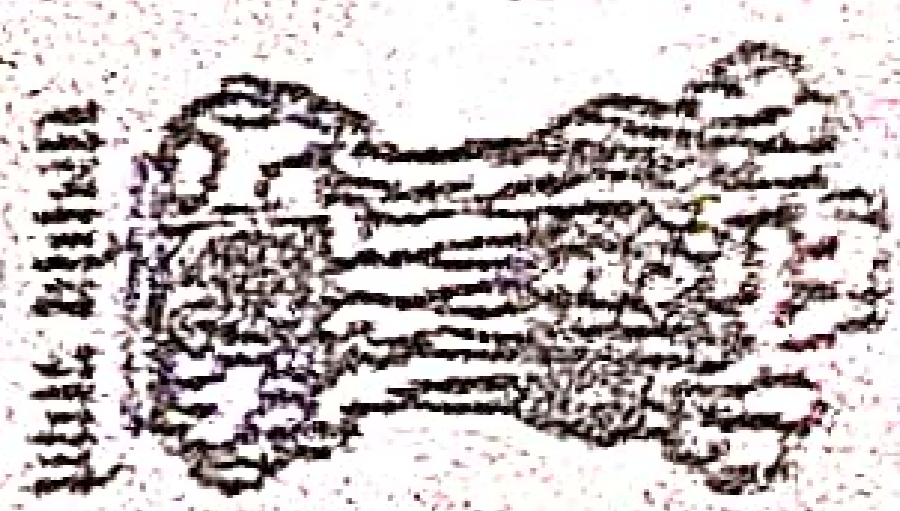
Class of Vehicle	Code	Issued By	Date of Issue	Vehicle Category	Badge Number	Badge Issued Date	Badge Issued By
MCWG	LMV	UP57	19-01-2024	MT			
MVSD							

Emergency Contact Number

Licensing Authority
UP57 KUSHNAGAR

आयकर विभागा

INCOME TAX DEPARTMENT



सत्यमेव जयते

भारत सरकार

GOVT. OF INDIA



नाम / Name

MERAJUDDIN MANSURI

पिता का नाम / Father's Name

ISLAM MANSURI

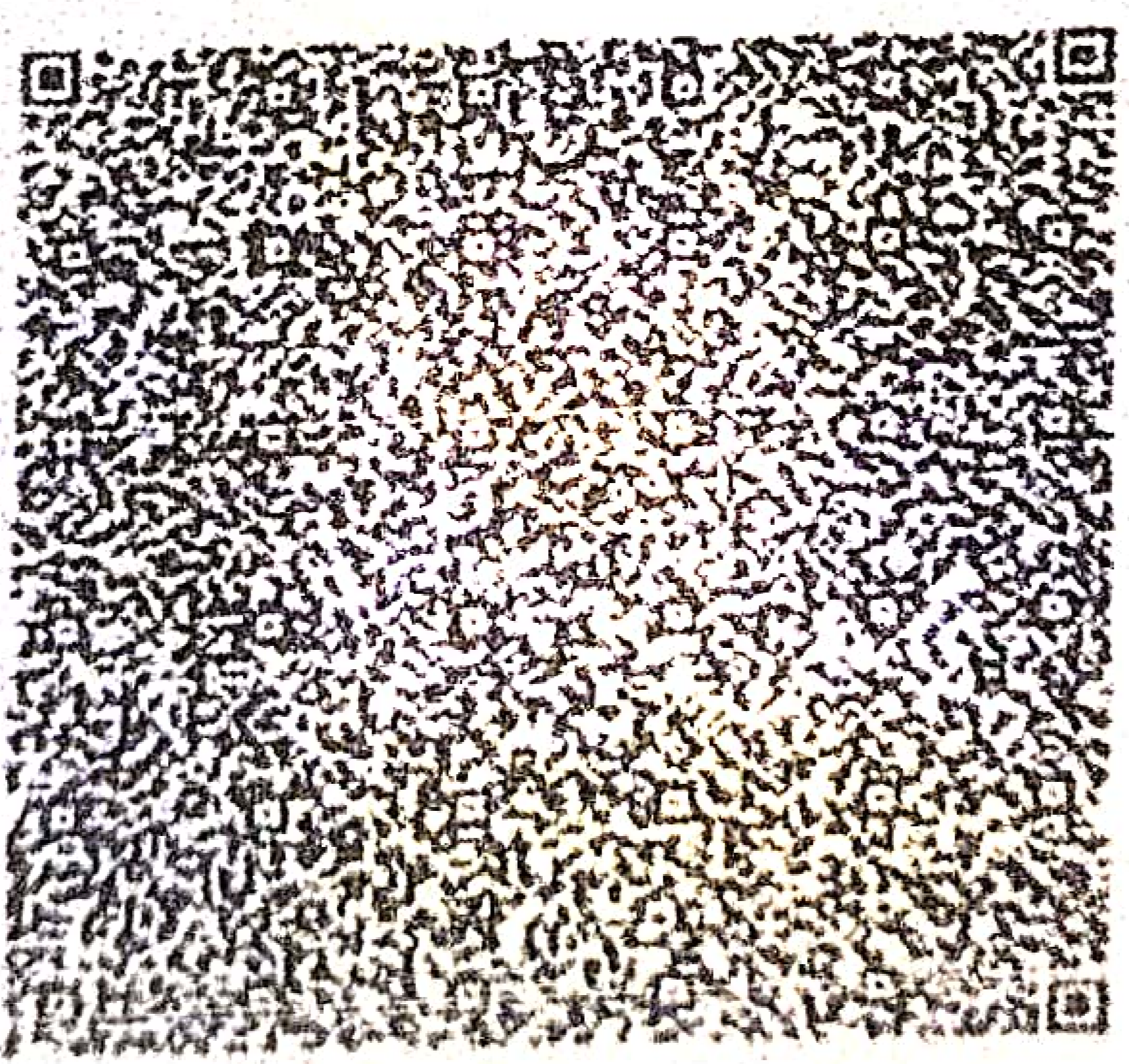
जन्म की तारीख / Date of Birth

15/07/2002

स्थायी संकेत संख्या कार्ड

Permanent Account Number Card

INPM4321P



MeraJuddin Mansuri

हस्ताक्षर / Signature

65030