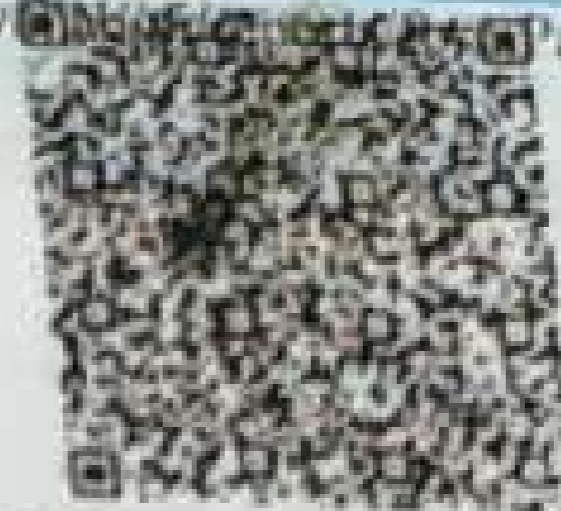




GOVERNMENT OF UTTAR PRADESH
Transport Department PADRAUNA(KUSHI NAGAR)
FORM 23
CERTIFICATE OF REGISTRATION



Registration No : UP57BY4218 Registration Date : 17-Jun-2025
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : NAVYA MOTORS, ARAZI NO-930(KA),NH-28, NAUSARH, GORAKHPUR, , 188-273001
 Owner Name : WAHID HUSSAIN SIDDIQUI Son/wife/daughter of : JAHID HUSSAIN SIDDIQUI
 Full Address: (Permanent) : H.N. 42 KANAURA, PO- JAURAMANRAKHAN, PS- CHAURA KHAS, KUSHINAGAR, UTTAR PRADESH-274401
 Full Address: (Temporary) : H.N. 42 KANAURA, PO- JAURAMANRAKHAN, PS- CHAURA KHAS, KUSHINAGAR- UTTAR PRADESH-274401
 Fitness Up To : 16-Jun-2040 Owner Serial No : 1
Detailed Description
 Class of Vehicle : M-CYCLE/SCOOTER Link Vehicle No :
 Ownership : INDIVIDUAL Norms : Not Available
 Maker's Name : HERO MOTOCORP LTD
 Front HSRP No : AA2122689198 Rear HSRP No : AA2125692933
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 06/2025
 No of Cylinders : 0 Chassis No : MBLCEW048S6F00642
 Engine No : ECD001S6F00342 Fuel : PURE EV
 Horse Power(BHP) : 8.04 Cubic Capacity : 0.00
 Maker's Classification : VIDA V2 PLUS Wheel base : 1301
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleeper Cap : 0 Unladen Wt (kgs) : 124
 Colour : BLACK Laden/GV Wt (kgs) : 274
 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 IDFC FIRST BANK LTD, GORAKHPUR, GORAKHPUR, , Gorakhpur, Uttar Pradesh-273001 w.e.f. 13-Jun-2025.

Purchase dt : 13-Jun-2025 Sale Amt : 125000/-
 OTT Date : Amount/Rcpt No : /
 Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
 Date of Approval : 30-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 17-Jun-2025 to 16-Jun-2040

Date : 05-Jul-2025 16:58:25

Taxation Particulars / Advance Registration Mark Fee Details

A.R. TO. (A)
 Signature of Registering Authority
 Date : 05-Jul-2025

Q 3741363

Gupta

AUTOMOBILES

ESTIMATE

GSTN: 09AHWPG0569P1ZE

AUTHORISED DEALER



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

No. **3044**

Date **27-04-2028**

Name

Wahid Hussain Siddiqui

Add.

UP 5704 4218

S.NO.	PARTICULARS	QTY.	RATE	AMOUNT Rs.	P.
	Upper Cover	(L)		1000	
	Lower Cover	(L)		1850	
	Levs (L)			250	
	mirror - (L)			250	
	Handle			600	
	Rear Wipers (L)			250	
	Labour charge			000	
TOTAL				5000	

Authorised Signatory

T सूचना पत्र

pot / Final su
क्त करने की

Hussain

-BY 421

1/2028/2

025 -

1 - 2028

rauna

Hussain

T 28 -

सर्व

N/A

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.	6390415369 Wahid Hussain Siddiqui
2	Vehicle No. / वाहन संख्या	UP57BY 9218
3	Policy No. / पालिसी संख्या	252400/31/2026/22490
4	Period of Insurance / बीमा अवधि	13-06-2025 - 12-06-2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	24-04-2026 11:00 AM
6	Place of Accident / दुर्घटना का स्थान	Padraura
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	6390415369 Wahid Hussain Siddiqui
8	Estimated Loss / अनुमानित हानि	5000/-
09.	Cause of Accident / दुर्घटना का कारण :	गाड़ी लेकर जा रहे थे रात में एक कच्चा होड़ भागा जिसके स्थाने के चक्कर में गाड़ी डिस्बैलेट लेकर गया तब जि गये और गाड़ी डमेज हो गया ।
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 / फोन नं.	912519 1149 Gupta Automobile Padraura

Date / दिनांक : 27-04-2026
हस्ताक्षर

Wahid Hussain
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. 252400/31/2026/22490

Tel. No. _____

Period of Insurance 12-06-2026

Claim No. _____

THE ISSUE OF THIS FORM IS NOT TO BE TAKEN AS AN ADMISSION OF LIABILITY
 Please answer All relevant questions fully

I. INSURED

(a) Name : Wahid Hussain Siddiqui
 (b) Address for correspondence : _____
 (c) Telephone : 6390 415369

2. THE INSURED VEHICLE

Make & Year <u>2025</u>	Engine No. <u>0CDB00156F00342</u> Chassis No. <u>MBLCE004056F00642</u>	Registration No. <u>UP57044210</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
 (c) Was trailer attached? use
 (d) If a Motor Cycle/scooter
 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 : _____
- N/A

3. DRIVER AT THE TIME OF ACCIDENT

- (a) Name : Wahid Musseem Siddiqui
(b) Age : _____
(c) Address : _____
(d) Is the Driver : _____
1. Owner : owner
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 : CP5720160013115
(h) Issuing Authority : _____
(i) Date of Expiry : 19-07-2036
(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 : 24-04-2026 11:00AM
(b) Place : Padrauna
(c) Speed of vehicle at the time of accident : _____
(d) Give a short description of the accident : वृत्त की स्थिति में चलाते ही अचानक ब्रेक फेल हो गया
(e) If any third party was responsible for this accident give the name and address : कोई तृतीय पार्टी जिम्मेदार नहीं है

6. DAMAGE TO INSURED VEHICLE

- (a) Full details of damage : CPPE COR, LOW COR, REAR ETC
(b) Estimated cost of repairs : _____
(c) When and where can the damaged vehicle be inspected : Gupta Automobile Padrauna

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? : _____
- MIA

8. INJURY TO DRIVER/OCCUPANT

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

~~MIA~~

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. : _____

~~MIA~~

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 : _____

~~MIA~~

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 27-04-2002

Wahid Hussain
Signature of the insured _____

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 *Wahid Hussain*
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank




The Oriental Insurance Company Ltd.
Policy Schedule

Report ID : PGIR0928

Page No : 1

The Document is Digitally Signed
Signed By: THE ORIENTAL INSURANCE COMPANY LIMITED
Date: 13/06/2025 10:18:28 IST
Reason: Signing for CGL

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 Issued On
Policy No	252400/31/2026/22490	Proposal No. & Date	R/252400/31/2026/100801114/4 & 13-JUN-2025
Agent/Broker Code	BA0000155144	Policy Period (OWN DAMAGE)	FROM 15:15 ON 13/06/2025 TO MIDNIGHT OF 12/06/2026
Agent/Broker Name	ABHINAV BHATI	Policy Period (LIABILITY)	FROM 15:15 ON 13/06/2025 TO MIDNIGHT OF 12/06/2030
Insured Name	WAHID HUSSAIN SIDDIQUI (GSTIN:)		Lead /Breakin No
Insured Address	C/O JAHID HUSSAIN SIDDIQUI, R/O H.N. 42 KANAURA PO- JAURA MANRAKHAN, PS- CHAURA KHAS, PADRAUNA (KUSHINAGAR), , NA, 0		Insured State
INSURED MOTOR VEHICLE DETAILS		INSURED DECLARED VALUE (IDV) (in Rs.)	
Make	HERO	Vehicle	109250
Model & Variant	VIDA V2 PLUS	Electrical Accessories	0
Registration No	NEW	Non Electrical Accessories	0
Year Of Manufacture	2025	Total IDV	109250
Engine -Chassis No	ECD001S6F00342 - MBLCEW048S6F00642	IMF CONTRACT NO	
Cubic Capacity	6	Policy Type	Zone B - Rest of India
Seating Capacity	1 + 1	Geographical Area	
Type Of Body	SOLO	Type Of Fuel	BATTERY POWERED - ELECTRICAL
RTO Location			
Schedule Of Premium (Amount in Rs.)			
OWN DAMAGE SECTION(A)		LIABILITY SECTION (B)	
Vehicle	1831.03	Basic Third Party Liability	3273
Elec Accessories	0	Compulsory PA Cover Premium	0
Non-Elec Accessories	0	PA Cover for 0 Person Of Rs (0) each (IMT-16)	0
		Legal Liability (WC) to driver (IMT-28)	0
Basic Premium	166.03	Legal Liability to Employees (IMT-29)	0
Geographical Area Extn (IMT-1)	0	Legal Liability to Passenger (IMT-46)	NA
		Driving Tuition Loading On TP Premium (60%)	NA
Driving Tuition Loading On OD Premium (60%)	0	PA Paid Driver, Conductor, Cleaner-GR36B3	0
Sub-Total Additions	0	Net Liability Premium (B)	3273
Deductibles		Total Premium (A+B)	3712
Voluntary Deductibles (IMT 22A)	0	GST	668
Anti- Theft Device (IMT-10)	0	SERVICE TAX	0
AAI Membership (IMT-8)	0	STAMP DUTY	0.00
No Claim Bonus	0	Swachh Bharat Cess@0.50%	0
Discount for vehicle designed for handicapped	0	Krishi Kalyan Cess@0.50%	0
SIP Discount	0	Gross Premium Paid	4380
Sub -Total Deductibles	0	Note:	
Add-On Coverages		1. Policy Issuance is the subject to the realisation of cheque	
NIL Depreciation	273	2. Consolidated Stamp Duty paid via Challan No	
		3. The Policy is subject to a compulsory Deductible of Rs 0(IMT-22)	
Return to Invoice	0	4. Voluntary excess Rs(0)	
Key Replacement	0	5. Subject to Endorsements IMT, 7,10,28,	
Consumables	273		
Sub Total Add-on Coverages	439		
Net own Damage Premium(A)			
Nominee Name		Age	1
Payment Method		Relation	
Payment Details :	Payment Method	Cheque No./Transaction No.	Amount
		Bank Name	4380
Financer Type	Financer Name	Financer Branch	GORAKHPUR
POS Name	POS ID	POS PAN NO/Aadhar No	NA
In the event of a claim under the policy exceeding Rs. 1lac or a claim for refund of premium exceeding Rs 1lac, 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.			
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.			
I/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/his hands at 252400 on 13-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 MV 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) Organized racing (4) Pace Making (5) Speed testing (6) Reliability trails			
g) Any 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			
Limits of Liability Clause: Under section II-1 (i) of the policy - Death of or body injury. Such amount is necessary to meet the requirement of the motor vehicle act 1988. Under Section II-1 (ii) of the policy - Damage to third party property is Rs. 7.5 lakhs P.A. Cover under section III for owner-Driver is RS 0			
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 year(s), as per the The preceding year/20%, preceding two consecutive 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			
I/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			
For and on behalf of The Oriental Insurance Company Limited			
Approved By : UNIV@252400		General Manager Authorized Signature	
Approved On : 13-JUN-25			
Place : MRT			
Printed On : 03-DEC-25			

UNION OF INDIA Driving Licence 

UP57 20160013115


WAHID HUSSAIN SIDDIQUI
पुत्र / Name

18/12/1997
जन्म तिथि / Date of Birth


UNKNOWN
Blood Group

20/07/2016
कार्य जारी की तिथि / Date of Issue


19/07/2016
वैधता / Validity 36



UP57 20160013115


 MCVG
 20/07/2016

UP03143773RS



Form 7 Rule 16(2)

संस्थान / Issuing Authority Sign
KUSHINAGAR

पता / Address
 WILL - KANAURA
 PO - JAURA BAZAR, PS - PATHERAWA
 KUSHINAGAR

Wahid
 Holder's Signature



भारत सरकार
Government of India



वाहद हुसैन सिद्दिकी
Wahid Hussain Siddiqui
जन्म तिथि/DOB: 18/12/1997
गुण/ MALE

Download Date: 26/08/2021



Issue Date: 30/07/2021

8948 4287 2916

VID : 9101 4393 6405 5307

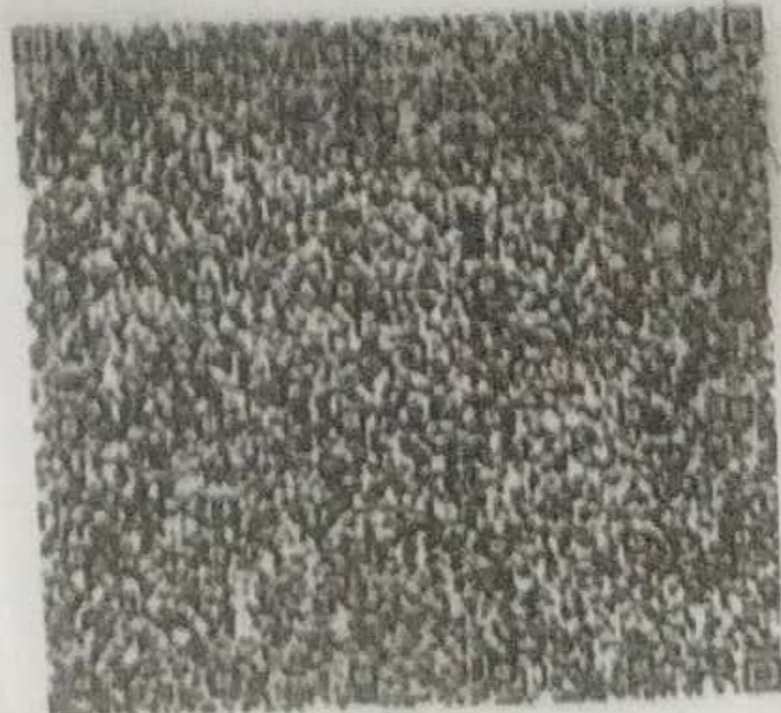
जेरा अल्हाद, जेरा पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
जेरा: वाहद हुसैन सिद्दिकी, 42, कनौरा, कुशीनगर,
उत्तर प्रदेश - 274401

Address:
C/O: Wahid Hussain Siddiqui, 42, Kanaura,
Kushnagar,
Uttar Pradesh - 274401



8948 4287 2916

VID : 9101 4393 6405 5307



1947



help@uidai.gov.in



www.uidai.gov.in

आयकर विभाग
INCOME TAX DEPARTMENT

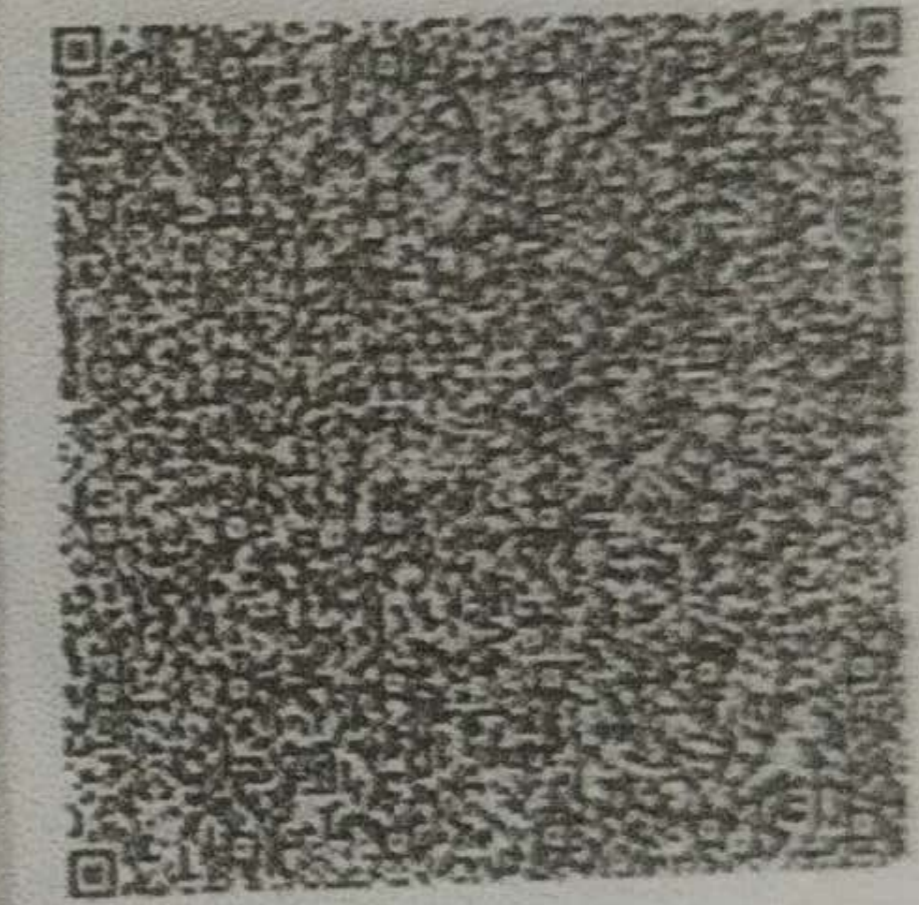


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

MCXPS1504C



नाम / Name
WAHID HUSSAIN SIDDIQUI

पिता का नाम / Father's Name
JAHID HUSSAIN SIDDIQUI

जन्म की तारीख /
Date of Birth
18/12/1997

@ahid
हस्ताक्षर / Signature

19082019



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

CERTIFICATE OF REGISTRATION



Registration No : UP57BY4218 Registration Date : 17-Jun-2025
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : NAVYA MOTORS, ARAZI NO-930(KA),NH-28, NAUSARH, GORAKHPUR, . . 188-273001
 Owner Name : WAHID HUSSAIN SIDDIQUI Son/wife/daughter of : JAHID HUSSAIN SIDDIQUI
 Full Address: (Permanent) : H.N. 42 KANAURA, PO- JAURAMANRAKHAN, PS- CHAURA KHAS, KUSHINAGAR,
 UTTAR PRADESH-274401
 Full Address: (Temporary) : H.N. 42 KANAURA, PO- JAURAMANRAKHAN, PS- CHAURA KHAS, KUSHINAGAR-
 UTTAR PRADESH-274401
 Fitness UpTo : 16-Jun-2040 Owner Serial No : 1
Detailed Description
 Class of Vehicle : M-CYCLE/SCOOTER Link Vehicle No :
 Ownership : INDIVIDUAL Norms : Not Available
 Maker's Name : HERO MOTOCORP LTD
 Front HSRP No : AA2122689198 Rear HSRP No : AA2125692933
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 06/2025
 No of Cylinders : 0 Chassis No : MBLCEW048S6F00642
 Engine No : ECD001S6F00342 Fuel : PURE EV
 Horse Power(BHP) : 8.04 Cubic Capacity : 0.00
 Maker's Classification : VIDA V2 PLUS Wheel base : 1301
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleeper Cap : 0 Unladen Wt (kgs) : 124
 Colour : BLACK Laden/GV Wt (kgs) : 274
 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 IDFC FIRST BANK LTD, GORAKHPUR, GORAKHPUR, . Gorakhpur, Uttar Pradesh-273001 w.e.f. 13-Jun-2025.

Purchase dt : 13-Jun-2025 Sale Amt : 125000/-
 OTT Date : Amount/Rcpt No : /
 Vehicle Is Govt/ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
 Date of Approval : 30-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 17-Jun-2025 to 16-Jun-2040

A.R. TO. (A)
 Signature of Registering Authority
 Date : 05-Jul-2025

Date : 05-Jul-2025 16:58:25

Taxation Particulars / Advance Registration Mark Fee Details

Q 3741363