

ESTIMATE

GSTN: 09AHWPG0569P1ZE

Gupta

AUTOMOBILES

AUTHORISED DEALER



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

No. 3046

Date 28-04-28

Name

Pritam Mishra

Add.

UP57B4 5253

S.NO.	PARTICULARS	QTY.	RATE	AMOUNT	
				Rs.	P.
	Visor			1200	
	M/L			3800	
	HIS			400	
	Fork pipe - (2)			2300	
	Handle			600	
	Legend			675	
	Seat cover (R)			750	
	Side panel (R)			780	
	mirror - R + L			500	
	Handle - T			1000	
	Gear Lever			600	
	Centre			400	
	Rear fockar Both			2000	
	Labour charge			1200	
			TOTAL	17,005/-	

Authorised Signatory



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. 252400/31/2026/24044

Tel. No. _____

Period of Insurance 20-06-2026
 Claim No. _____

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

1. INSURED

(a) Name : Pritham Mishra
 (b) Address for correspondence : _____
 (c) Telephone : UP57045253

2. THE INSURED VEHICLE

Make & Year <u>2025</u>	Engine No. <u>HA11F2SHF07690</u> Chassis No. <u>MBLHAW41SHF0896</u>	Registration No. <u>UP57045253</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? No
 (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 : _____

NA

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.	Pritam Mishra
2	Vehicle No. / वाहन संख्या	UP57B45253
3	Policy No. / पालिसी संख्या	252400/31/2026/24044
4	Period of Insurance / बीमा अवधि	21-06-2025 — 20-06-2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	25-04-2026 4:00 PM
6	Place of Accident / दुर्घटना का स्थान	Pipla Barar
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	Pritam Mishra 6991789562
8	Estimated Loss / अनुमानित हानि	17,005/- रु
9	Cause of Accident / दुर्घटना का कारण :	वह री चौराहे पर जा रहे थे सामान खरीदने तक तक अचानक एक बच्चा (छोटा) बाइक के सामने से लगा तब तक गाड़ी के सामने दूसरी गा गयी और उससे टक्कर ले गयी और दया करके गाड़ी गिर गयी और डैमेज 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 / फ़ोन नं.	9151971 98 Gupta Automobile padrauna

प्रितम मिश्रा

Signature of Insured / बीमाधारक के

Date / दिनांक : 28-04-2026
हस्ताक्षर

3. DRIVER AT THE TIME OF ACCIDENT

(a) Name : Pritam Mishra
(b) Age : _____
(c) Address : _____
(d) Is the Driver
1. Owner : _____
2. paid driver? : Other
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 : UP5720240004667
(h) Issuing Authority : _____
(i) Date of Expiry : 01-07-2039
(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 : 25-04-2026 4:00 P.M
(b) Place : Pipra Bazar
(c) Speed of vehicle at the time of accident : _____
(d) Give a short description of the accident : एक बच्चा बॉलार्ड के पास से अचानक भागा
(e) If any third party was responsible for this accident give the name and address : एक लकड़पकी गाड़ी वाला था और उससे बकल हो गयी -

6. DAMAGE TO INSURED VEHICLE

(a) Full details of damage : Victor M/L, W/S, Fork pin @ 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~~

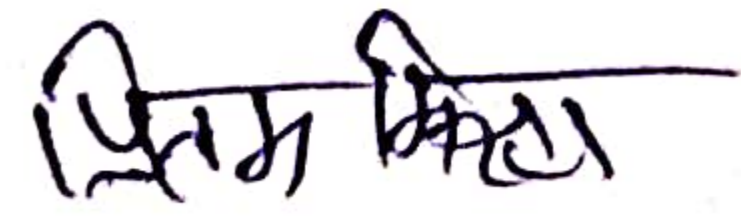
10. THEFT

- (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 20-04-2002

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
Reverse Stamp
When Amount
Exceeds Rs. 5000/-

Witness
Name
Signature
Address

Signature प्रियम मिश्रा
Occupation
Address
.....
.....

Bank Account Number
Name of the Bank



The Oriental Insurance Company Ltd.
Policy Schedule

Report ID : PGIR0928

Page No : 1

Digitally signed by RAJIV KUMAR GUPTA
Date: 2025.06.21 13:48:57
Reason: Signing Policy for OICA

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 (MOTORISLD TWO WHEELERS (5 Years))	Policy Issued On	21-JUN-25
Policy No	252400 31/2026 24044	Proposal No. & Date	R/252400/31/2026/16751 & 21-JUN-2025
Agent/Broker Code	BA0000155144	Policy Period (OWN DAMAGE)	FROM 12:11 ON 21/06/2025 TO MIDNIGHT OF 20/06/2026
Agent/Broker Name	ABHINAV BHATI	Policy Period (LIABILITY)	FROM 12:11 ON 21/06/2025 TO MIDNIGHT OF 20/06/2030
Insured Name	PRITAM MISHRA (GSTIN:)	Lead/Breakin No	/
Insured Address	C/O CHHOTELAL MISHRA, VILL-CHITAJHA POST-PIBRA BAZAR THANA-NEBUA-NAURANGIA, PADRAUNA (KUSHINAGAR), NA,	Insured State	UTTAR PRADESH

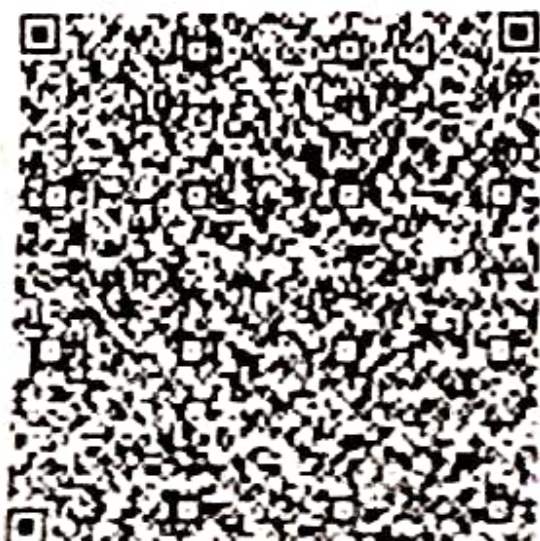
INSURED MOTOR VEHICLE DETAILS		INSURED DECLARED VALUE (IDV) (in Rs.)	
Make	HERO MOTOR CORP	Vehicle	77511
Model & Variant	PASSION - SELF DRUM ALLOY FITS BSVI	Electrical Accessories	0
Registration No	NEW	Non Electrical Accessories	0
Year Of Manufacture	2025	Total IDV	77511
Engine - Chassis No	HA11F2SHF07684 - MBLHAW41ISHF08961	TMF CONTRACT NO	
Cubic Capacity	100	Policy Type	Zone B - Rest of India
Seating Capacity	1 - 1	Geographical Area	INDIA
Type Of Body	SOLO	Type Of Fuel	PETROL
RTO Location			

OWN DAMAGE SECTION(A)		LIABILITY SECTION (B)	
Vehicle	1299.08	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	1221.08	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		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)	4162
AAI Membership (IMT-8)	0	GST	750
No Claim Bonus	0	SERVICE TAX	0
Discount for vehicle designed for handicapped	0	STAMP DUTY	0.00
SIP Discount	1104	Swachh Bharat Cess@0.50%	0
Sub-Total Deductibles	1104	Krishi Kalyan Cess@0.50%	0
Add-On Coverages		Gross Premium Paid	4912
NIL Depreciation	194		
Return to Invoice	0		
Key Replacement	0		
Consumables	0		
Sub-Total Add-on Coverages	194		
Net own Damage Premium (%)	311		

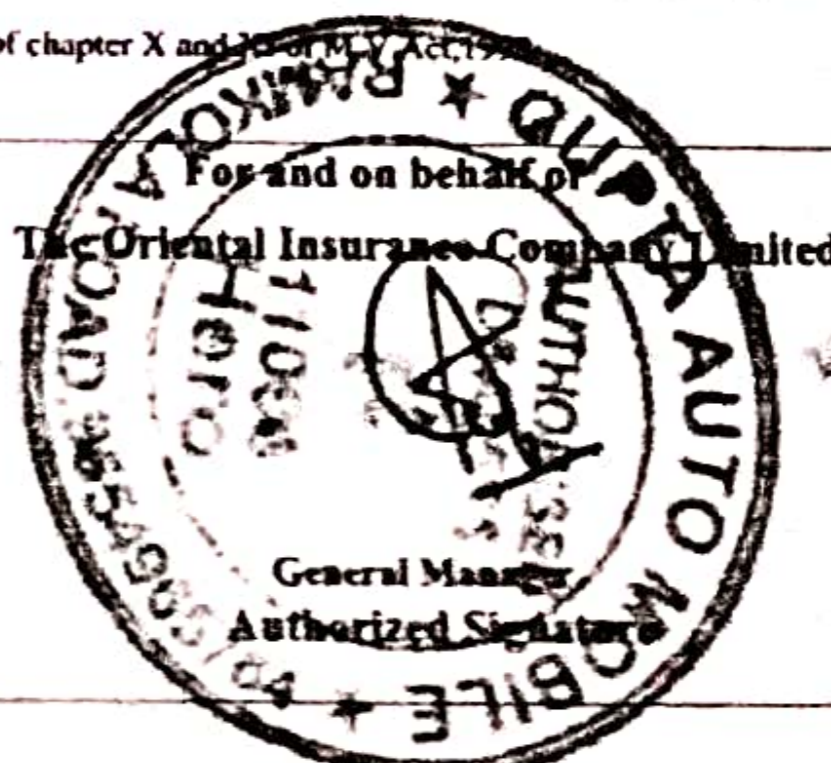
Note:
1. Policy Issuance is the subject to the realisation of cheque
2. Consolidated Stamp Duty paid via Challan No
3. The Policy is subject to a compulsory Deductible of Rs 0 (IMT-22)
4. Voluntary excess Rs(0)
5. Subject to Endorsements IMT, 7, 10, 28.

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 MVA 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
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 1998 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
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
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 Motor Vehicles Act, 1988.
This insurance excludes all pre existing damages



Approved By : 922137SMD
Approved On : 21-JUN-25
Place : MRT
Printed On : 21-JUN-25



यह बीमा पालिसी, गाड़ी का नया बीमा
(OD) एक साल का तथा यह चारों बीमा
पाँच साल के लिए ही मान्य है।



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



Registration No : UP57BY5253 Registration Date : 24-Jun-2025
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : GUPTA AUTOMOBILES, KASIYA ROAD, PADRAUNA, , 189-274304
 Owner Name : PRITAM. MISHRA Son/wife/daughter of : CHHOTELAL MISHRA
 Full Address: (Permanent) : VILL-CHITAHA, POST-PIPRA BAZAR,, THANA-NEBUA NAURANGIA, KUSHINAGAR, UTTAR PRADESH-274305
 Full Address: (Temporary) : VILL-CHITAHA, POST-PIPRA BAZAR,, THANA-NEBUA NAURANGIA, KUSHINAGAR- UTTAR PRADESH-274305
 Fitness UpTo : 23-Jun-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 : AA2132808999 Rear HSRP No : AA1043059166
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 06/2025
 No of Cylinders : 1 Chassis No : MBLHAW411SHF08961
 Engine No : HA11F2SHF07684 Fuel : PETROL
 Horse Power(BHP) : 8.17 Cubic Capacity : 97.20
 Maker's Classification : PASSION+ LED (DRS) Wheel base : 1235
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleeper Cap : 0 Unladen Wt (kgs) : 116
 Colour : SPORTS RED BLACK Laden/GV Wt (kgs) : 246
 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 HERO FINCORP LIMITED DELHI, DELHI, , New Delhi, Delhi-110057 w.e.f. 22-Jun-2025.

Purchase dt : 21-Jun-2025 Sale Amt : 81591/-
 OTT Date : 21-Jun-2025 Amount/Rcpt No : 8160 / UP57D25060003568
 Vehicle is Govt./ Pvt. : PRIVATE Tax Exempted or Not : NOT EXEMPTED
 Date of Approval : 26-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 24-Jun-2025 to 23-Jun-2040

Date : 26-Jul-2025 12:00:30
Taxation Particulars / Advance Registration Mark Fee Details

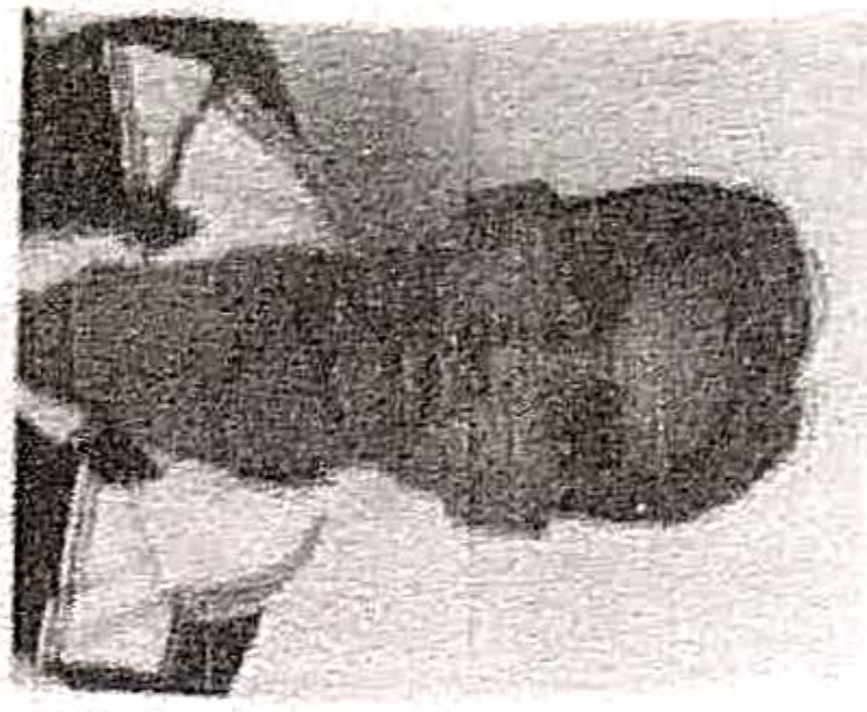
Signature of Registering Authority
 Date: 26-Jul-2025
A.R.T.O. (A)
 KUSHINAGAR (U.P.)

Q 4475515



भारत सरकार

Government of India



प्रितम मिश्रा

Pritam Mishra

जन्म तिथि / DOB : 02/07/1999

पुरुष / Male

4722 1311 3575



आधार - आम आदमी का अधिकार

Unique Identification Authority of India

पता:

आत्मज: छोटेलाल मिश्रा, चितहा,
कशीनगर, पिपरा बाजार, उत्तर प्रदेश,
274305

Address:

S/O: Chhotelal Mishra, Chitaha,
Kushinagar, Pipra Bazar, Uttar
Pradesh, 274305

4722 1311 3575



1800 300 1947



help@uidai.gov.in



www.uidai.gov.in

ESTIMATE GSTN : 09AHWP0569P1ZE
HERO AUTHORIZED DEALER
HERO AUTOMOBILES

Indian Union Driving Licence
 Issued by Uttar Pradesh



UP57 20240004667

Issue Date 18-03-2024 Validity (NT) 01-07-2039 Validity (TR)



Holder's Signature

(18-03-2024)

Name: PRITAM MISHRA
 Date of Birth: 02-07-1999 Blood Group:
 Son/Daughter/Wife of: CHHOTELAL MISHRA
 Address: Pipra Bazar Chitaha Padrauna Kushinagar
 Uttar Pradesh 274305

Organ Donor: N

Date of First Issue

DL No: UP57 20240004667

UPDL 0000 13014220



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
LMV	LMV	UP57	18-03-2024	NT			
MVSD							

Emergency Contact Number

Licensing Authority
 UP57 KUSHINAGAR

पुस्तक संख्या

पुस्तक क्रमांक

WORLDWIDE DEPARTMENT

COINT. OF INDIA



INTERNATIONAL ACCOUNTING NUMBER CARD

EXVPNOSTYTA

CHHOTTELAL MISHRA

CHHOTTELAL MISHRA

020711998

020711998

Signature

