

MOSARAM AUTO SALES

L.R.P.ROAD, LAKHIMPUR KHERI, LAKHIMPUR, KHERI, 262701, UP, INDIA
 State Code: 9 Contact: 7800009643, 7408404715, 7408404714, 7800009644
 GSTIN No: 09AAJFM3951B1ZD
 Authorized Dealer: Hero MotoCorp Ltd.

ESTIMATE

Estimate No. 10730-03-REST-1125-592
 Customer Name VIKAS VERMA
 VIN MBLJAW184L9L00066
 Insurance Company
 HMCGL Card No 1073021840003326
 Part Details

Date 11-11-2025
 Contact No. 6387111935
 Model SUPER SPLENDOR
 Reg No. UP31BN7388
 HMCGL Card Category Platinum

S No	Part Number	HSN No.	Billing Type	Rate	Qty	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount
1	61300AAG100RS -FRONT COWL(NH-1 (TYPE-1))	87141090	Paid	1,214.4	1	9.00	9.00	0.00	0.00	0.00	0.00	1,433.00
2	17520AAGA00US -FUEL TANK BL(BR)-013M(G)	87141090	Paid	7,761.0	1	9.00	9.00	0.00	0.00	0.00	0.00	9,158.00
3	83402AAG300S -PANEL INNER	87141090	Paid	166.95	1	9.00	9.00	0.00	0.00	0.00	0.00	197.00
4	3310AAAGH20S -LIGHT ASSY HEAD(W/O BULB)	85122010	Paid	521.19	1	9.00	9.00	0.00	0.00	0.00	0.00	615.00
5	61000AAGA00RS -FRONT FI NDI R NH-1	87141090	Paid	921.19	1	9.00	9.00	0.00	0.00	0.00	0.00	1,087.00
6	53178AAFH00S -LEVER COMPL STRG.HNDL.	87141090	Paid	71.19	1	9.00	9.00	0.00	0.00	0.00	0.00	84.00
7	53175KSP900S -LEVER R STRG.HNDL.	87141090	Paid	97.46	1	9.00	9.00	0.00	0.00	0.00	0.00	115.00
8	37100KTCA21S -METER ASSY COMB	87141090	Paid	1,515.2	1	9.00	9.00	0.00	0.00	0.00	0.00	1,788.00
9	35010AAG301S -KIT, LOCKS & KEYS	83012000	Paid	940.68	1	9.00	9.00	0.00	0.00	0.00	0.00	1,110.00
10	53100AAGA00S -PIPE STRG HANDLE	87141090	Paid	429.66	1	9.00	9.00	0.00	0.00	0.00	0.00	507.00
11	53200KTCA20S -STEM COMP STRG	87141090	Paid	1,175.4	1	9.00	9.00	0.00	0.00	0.00	0.00	1,387.00
12	51410KTC901S -PIPE COMP.FR.FORK	87141090	Paid	859.32	1	9.00	9.00	0.00	0.00	0.00	0.00	1,014.00
13	88120AANH01ZAS -MIRROR ASSEMBLY LEFT BACK(BLACK NH-1)	70091090	Paid	203.39	1	9.00	9.00	0.00	0.00	0.00	0.00	240.00
14	83500AAG500TS -R SIDE COVER	87141090	Paid	1,269.4	1	9.00	9.00	0.00	0.00	0.00	0.00	1,498.00
15	77240AAG500TS -R BODY COWL	87141090	Paid	663.56	1	9.00	9.00	0.00	0.00	0.00	0.00	783.00
16	77250AAG500TS -LEFT BODY COWL TYPE-3	87141090	Paid	624.58	1	9.00	9.00	0.00	0.00	0.00	0.00	737.00
17	77235AAGH20ZGS -CENTER REAR COWL(NH-A63M)	87141090	Paid	194.92	1	9.00	9.00	0.00	0.00	0.00	0.00	230.00
18	3370BAAGA0099S -UNIT TAIL LIGHT	85122010	Paid	432.20	1	9.00	9.00	0.00	0.00	0.00	0.00	510.00
19	50803KTC900S -GUARD LEG	87141090	Paid	573.73	1	9.00	9.00	0.00	0.00	0.00	0.00	677.00
20	3360AKTCA21S -WINKER ASSY R RR(W/O BULB)	85122010	Paid	152.54	1	9.00	9.00	0.00	0.00	0.00	0.00	180.00
21	K44426AACAH00S -KIT WHEEL COMP FRONT	87141090	Paid	3,515.2	1	9.00	9.00	0.00	0.00	0.00	0.00	4,148.00
22	50100AAG600S -FRAME BODY COMP	87141090	Paid	7,284.7	1	9.00	9.00	0.00	0.00	0.00	0.00	8,596.00

24	PILLION WOMEN 6410AAAG300S -WIND SCREEN SUB ASSY	87141090	Paid	288.98	1	9.00	9.00	0.00	0.00	0.00	0.00	341.00
25	3340AKTCA21S -WINKER ASSY R FR(W/O BULB)	85122010	Paid	148.31	1	9.00	9.00	0.00	0.00	0.00	0.00	175.00
26	3345AKTCA21S -WINKER ASSY L FR(W/O BULB)	85122010	Paid	148.31	1	9.00	9.00	0.00	0.00	0.00	0.00	175.00
27	61303AAGA00S -FRONT COWL CHROME	87141090	Paid	144.07	1	9.00	9.00	0.00	0.00	0.00	0.00	170.00
Parts Total											0.00	37,097.00

Labour Details												
S No	Job Code	SAC No.	Billing Type	Rate	SGST %	CGST %	UTGST %	IGST %	Discount %	Discount	Net Amount	
1	102032 - ACCIDENTAL LABOUR-SUPER SPLENDOR	998729	Paid	1,695.00	9.00	9.00	0.00	0.00	0.00	0.00	0.00	2,000.10
Jobs Total											0.00	2,000.10

Parts Total	37,097.00
Labour Total	2,000.10
SGST (Parts) 9%	2,829.43
CGST (Parts) 9%	2,829.43
SGST (Labour) 9%	152.55
CGST (Labour) 9%	152.55
Total	39,097.10

Rupees in Words: Thirty Nine Thousand Ninety Seven and paise Ten Only

Authorised Signatory

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 CITY Jurisdiction Only
- #HeroMotocorp can further contact you via Call, SMS or email for feedback or to give information about New launches.

10730 - Main W/S

To / सेवा में,
The Oriental Insurance Co Ltd /
दि ओरिएण्टल इश्योरेंस कंपनी लिमिटेड
MEERUT

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.	VIKASH VERMA, 6387111935
2	Vehicle No. / वाहन संख्या	UP31BN7388
3	Policy No. / पालिसी संख्या	MS/2025/7001/0/46575/446636
4	Period of Insurance / बीमा अवधि	08/06/2025 से 07/06/2026
5	Date of loss & Time / दुर्घटना का दिनांक & समय	27/10/2025, 8:00 PM
6	Place of Accident / दुर्घटना का स्थान	बहुल मिर्चा पेट्रोल पंप के पास
7	Name of the Driver, D L No. & Mobile No / ड्राइवर का नाम, डी एल नं. & मोबाइल नं	VIKASH VERMA, 6387111935 UP3120210007931
8	Estimated Loss / अनुमानित हानि	
09.	Cause of Accident / दुर्घटना का कारण :	लखीमपुर से ईसागर जा रहे थे तभी अचानक बहुल मिर्चा पेट्रोल पंप के पास सामने से टूली जा रही थी उसने अचानक ब्रेक लगा दिया जिससे बेरी गाड़ी टूली से तकराकर गाड़ी बायीं ओर गिरकर हतिगस्त हो गयी ।
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.	MOSARAM AUTO SALES LRP ROAD LAKHIMPUR KHURI, 9151154036

Date / दिनांक : 07/11/2025
हस्ताक्षर



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. MS/2025/7001/46575/446636

Tel. No.

Period of Insurance 08/06/25 to 07/06/26

Claim No.

THE ISSUE OF THIS FORM IS NOT TO BE TAKEN AS AN ADMISSION OF LIABILITY

Please answer All relevant questions fully

I. INSURED

- (a) Name VIKASH VERMA
(b) Address for correspondence VILL CHINTAPUR PO - VIRSTINGHPUR PS - ISANAGAR
(c) Telephone 638711935

2. THE INSURED VEHICLE

Make & Year <u>HERO</u> <u>2020</u>	Engine No. <u>JA07ABL9L00133</u> Chassis No. <u>MBLJAW184L9L00066</u>	Registration No. <u>UP31BN</u> <u>7388</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?
(c) Was trailer attached?
(d) If a Motor Cycle/scooter
1. Was a side-car attached
2. Was a pillion rider carried

N/A

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 : VIKASH VERMA
 (b) Age : 02/01/2002
 (c) Address : VILL: CHINTAPURWA PO- VIRSINGHPUR PS- ISHNAGAR
① HAURAMARA LMP, UP
 (d) Is the Driver
 1. Owner : Yes
 2. paid driver? : No
 3. Owner's relative or friend? : No
 (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 : UP31 20210007931
 (h) Issuing Authority : 16/06/2021
 (i) Date of Expiry : 01/01/2042
 (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 : 27/10/2025, 8:00 PM
 (b) Place : बहुला मिर्चा केरील पंच के पास
 (c) Speed of vehicle at the time of accident : 30-40
 (d) Give a short description of the accident : बहुला मिर्चा केरील पंच के पास सामने से दाली जा रही थी उसने अचानक
ब्रेक लगा दिया जिससे मेरी गाड़ी हिली से टकराकर गाड़ी
बोली और बिरबर हाईवे पर हो गई।
 (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 : FRONT AND LEFT
 (b) Estimated cost of repairs : MOSARAM AUTO SALES LRPURAD
 (c) When and where can the damaged vehicle be inspected : LAKHIMPUR KHAT, 9151154036

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 Police 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 07/11 2005

Signature of the insured

[Signature]

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. UP31BN7388 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 *[Signature]*

Occupation

Address

Bank Account Number

Name of the Bank

Package Contract No.: MS/2025/7001/O/46575/446636

Motorsathi Care Private Limited

B.Dass Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India

Contact us at:

Phone: +91 79410 50643

Email: info@motorsathi.com

Visit the help section of www.motorsathi.com

Name of Certificate Holder	Date of Birth	Mobile No.	Father/Husband Name	Make	Model	
VIKASH VERMA	2002-01-02	6387111935	SRI SHIV SHANKAR LAL	Hero Motocorp	SUPER SPLENDOR	
Sub Model	Vehicle Regn. No.	Engine No.	Chassis No.	Year of Mfg	Cubic Capacity	Vehicle Type
DRUM SELF CAST E20	UP31BN7388	JA07ABL9L00133	MBLJAW184L9L00066	2020-12-07	125	TW
Asset Declared Value (ADV)	Side Car ADV	Non-Electrical Accessories ADV	Electrical Accessories ADV	CNG/LPG/Bi-Fuel ADV	Total ADV	
33000.00	NA	0.00	0.00	0.00	33000.00	
Place of Regn.	Body Type	HP/Lease/Hire-Purchase Agreement	Branch Office of HP/Lease/Hire-Purchase	Seating Capacity	Offered Payment (incl. GST)	
	Solo			2	1690.77	
Address			City / District	Pin Code	State	
VILL-CHINTAPUR PO-VIRSINGHPUR PS-ISANAGAR				262701	Uttar Pradesh	
Nominee Name	Nominee Gender	Nominee Age	Nominee Relation	Package Start Date	Package End Date	
ANUJ VERMA	Male	27 Years	BROTHER	2025-06-08 14:15	Midnight of 2026-06-07	

Section A, VRC: 574.30 TCR: 428.34 Less Handicapped Discount: 0.00 For Anti-Theft Discount: 0.00 PA BONUS (0%): 0.00 Total with GST(A): 1002.64

Section B, EC: 0.00 EC Service: 0.00 ECPD: 0.00 Sub Total: 0.00 TAC: 0.00 ENC: 0.00 EDC: 0.00 MCPD: 0.00 Total(B): 0.00 GST (CGST @9% + SGST @9%): (B): 0.00 Total with GST(B): 0.00

Section C, MS Services(O): 374.58 MS Services(D): 0.00 MS Services(P): 0.00 GST (CGST @9% + SGST @9%): 67.42 Total MS Services with GST(C): 442.00

Section D, Drive Assure: 208.58 AHDC, DOC & Additional External Tyre Cover(AFTC): Other Discount: 0.00 GST (CGST @9% + SGST @9%): 37.55 Total with GST(D): 246.13

Total(Section A+B+C+D) Offered Price After Discount: 1691

Package Period Covered	2025-06-08 To 2026-06-07	2026-06-08 To 2027-06-07	2027-06-08 To 2028-06-07	2028-06-08 To 2029-06-07	2029-06-08 To 2030-06-07
ADV	33000	NIL	NIL	NIL	NIL
MS Services Period Covered (NODL)	1 Year	NIL	NIL	NIL	NIL

*THE VEHICLE COVERED IN THIS CONTRACT HAVE A VALID TP COVERAGE TAKEN FROM AN INSURANCE COMPANY VALID UPTO 2025-11-22 (DETAILS ARE PROVIDED BY THE CUSTOMER).

LIMITATIONS AS TO USE: This package covers use of the vehicle for any purpose other than: a) Hire or Reward b) Carriage of goods (other than samples or personal luggage) c) Organized Racing d) Pace Making e) Speed Testing f) Reliability Trials g) Any purpose in connection with Motor Trade.

DRIVER: Any person including covered individual: 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 Learners License may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

LIMIT OF ACCOUNTABILITY: Limit of the amount of the Companys accountability in respect of any one request or series of requests arising out of one event: Up to Rs - 100000. Note: The amount mentioned is estimated breakup. Actual Costs and Terms & Conditions are in package document which can be downloaded only via authorized portal www.motorsathi.com or MotorSathi App.

DISCLAIMER: The package stands cancelled or void in the event of Cheque Dishonored. The company may cancel the package by sending 7 days' notice in case of fraud, misrepresentation, nondisclosure of material fact or non-co-operation of the coverage.

ANTI MONEY LAUNDERING CLAUSE: In the event of a request under the package exceeding Rs 1lakh or a request for refund of payment exceeding Rs 1 lakh, the accountability shall comply with the provisions of AML package of the company. The AML package is available in all our operating offices as well as Company website.

TO REGISTER REQUEST PLEASE CONNECT WITH MOTORSATHI CARE PVT LTD AT: Website: www.motorsathi.com Customer Care / Toll Free Phone No: 7941050643 email id: info@motorsathi.com



IMPORTANT NOTICE: The coverage 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. All disputes arising out of or in connection with this agreement shall be subject to the exclusive jurisdiction of the courts at Aligarh.

Received with Thanks Rs 1690.77 ON 2025-06-05 from Mr./Ms. VIKASH VERMA against the ARN No. INCP00446636

The acknowledgement is subject to a compulsory excess of Rs. 100/- & Depreciation is applicable as per terms & conditions*

(Please turn overleaf for details) Consolidated Stamp Duty Paid Endorsements: IMT - 22, 16, 18

Customer Service Address: B.Dass Compound Opposite, DAV Public School, Naurangabad, Grand Trunk Road, Naurangabad, Aligarh, Aligarh, Uttar Pradesh, (202001) India





Transport Department Lakhimpur Kheri

FORM 23

CERTIFICATE OF REGISTRATION



Registration No : UP31BN7388 Registration Date : 07-Dec-2020
 Description of Vehicle : M-CYCLE/SCOOTER Purpose For Printing RC : NEW
 Dealer's Name & Address : MUSA RAM AUTO SALES, L R P ROAD, LAKHIMPUR KHERI, ...
 Owner Name : VIKASH VERMA Son/wife/daughter of : SRI SHIV SHANKAR LAL
 Full Address: (Permanent) : VILL-CHINTAPURWA PO-VIRSINGHPUR, VILL-CHINTAPURWA PO-VIRSINGHPUR, PS-
 ISANAGAR, KHERI, UTTAR PRADESH-262701
 Full Address: (Temporary) : VILL-CHINTAPURWA PO-VIRSINGHPUR, VILL-CHINTAPURWA PO-VIRSINGHPUR, PS-
 ISANAGAR, KHERI-UTTAR PRADESH-262701

Fitness UpTo : 06-Dec-2035 Tax UpTo : One Time
 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 : AA2021736623 Rear HSRP No : AA2022391081
 Type of Body : SOLO WITH PILLION Month/Year of Manuf. : 11/2020
 No of Cylinders : 1 Chassis No : MBLJAW184L9L00066
 Engine No : JA07ABL9L00133 Fuel : PETROL
 Horse Power(BHP) : 10.72 Cubic Capacity : 124.70
 Maker's Classification : SUPER SPLENDOR-DISC-S Wheel base : 1273
 ELF-CAST
 Seating Cap(in all) : 2 Standing Cap : 0
 Sleepar Cap : 0 Unladen Wt (kgs) : 123
 Colour : BLACK Laden/GV Wt (kgs) : 253
 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. As Regd. Weight(in kgs)
 Description
 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 : 23-Nov-2020 Sale Amt : 72950/-
 OTT Date : 23-Nov-2020 Amount/Rcpt No : 7295 / UP31D20110003204
 TaxUpTo : One Time Vehicle is Govt./ Pvt. : PRIVATE
 Tax Exempted or Not : NOT EXEMPTED Date of Approval : 07-Dec-2020

Other State/Transfer/Conversion Details

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

This certificate is valid from 07-Dec-2020 to 06-Dec-2035

Date : 21-Dec-2020 10:54:33

Taxation Particulars / Advance Registration Mark Fee Details

Signature of Registering Authority
 Date : 21-Dec-2020
 लखीमपुर खेरी

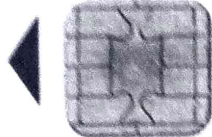
M 1346444



Indian Union Driving Licence
Issued by Uttar Pradesh



UP31 20210007931



Issue Date Validity (NT) Validity (TR)*
16-06-2021 01-01-2042



Holder's Signature

Name: **VIKASH VERMA**
Date of Birth: **02-01-2002** Blood Group: Organ Donor: **N**
Son/Daughter/Wife of: **SHIVSHANKAR LAL**

Address:
**VILL CHINTAPURWA PO VIRSINGHPUR PS
ISANAGAR DHAURAHARA, LAKHIMPUR KHERI, UP
261502**

Date of First Issue: **16-06-2021**

DL No: UP31 20210007931

UPDL000005612174



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	MCWG	UP31	16-06-2021	NT			
LMV	LMV	UP31	16-06-2021	NT			
MVSD							

Form 7 Rule 16(2)

Emergency Contact Number


Licensing Authority
UP31 LAKHIMPUR KHERI



विकास वर्मा
Vikash Verma
 जन्म तिथि/DOB: 02/01/2002
 पुरुष/ MALE

2320 4607 3064
 VID: 9181 1439 6808 2000

मेरा आधार, मेरी पहचान


भारत सरकार
Ministry of India

पता:
 C/O शिव शंकर लाल, चिंतपुरवा, बिरसिंगपुर,
 खैरी,
 उत्तर प्रदेश - 261502

Address:
 C/O Shiv Shankar Lal, chintapurwa,
 Birsinghpur, Birsinghpur, Kheri,
 Uttar Pradesh - 261502

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QR Code with photograph

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INCOME TAX DEPARTMENT

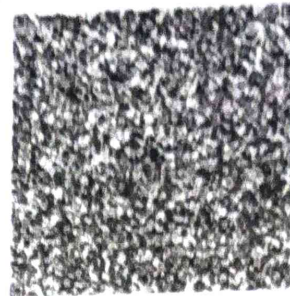


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

BWNPV1749K



नाम / Name
VIKASH VERMA

पिता का नाम / Father's Name
SHIV SHANKAR LAL

जन्म की तिथि / Date of Birth
02/01/2002

हस्ताक्षर / Signature

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