

## Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	ae0ddf0a-df99-4862-b34d-a027b4f22951
2	Name of customer	sadiq Hussain attar
3	Address	Horthatanhal ,Byali Oni , , Horthatanhal ,Koppal ,Kalaburagi Division,Koppal,Karnataka,583231
4	Address with Landmark (Address enhancements as the executive reached the shop)	Susrhta hospital
5	Name of Person Met	NA
6	Relationship	NA
7	Ownership of Office	NA
8	If Rented (Monthly Rent (O))	NA
9	Area Locality	Commercial
10	Name Plate / Address plate - Available	Yes
11	Years at current office	NA
12	Office Type	Shop in a Complex or Mall
13	Visit Lat Long	15.3374 , 76.1536
14	Type of Set up	NA
15	Number of Employees	NA
16	Neighbour Check	NA
17	Merchant Name	SADIQ HUSSAIN ATTAR
18	Contact Number	9731816838
19	Final Status	Negative

20	Detailed Final Remarks/Comments	<p>VISIT WAS CONDUCTED AT THE REGISTERED ADDRESS AT HORTHATANHAL, BYALI ONI, HORTHATANHAL, KOPPAL, KALABURAGI DIVISION, KOPPAL, KARNATAKA, 583231 ON 25-04-2025 AT 15:07:03. THE ADDRESS WAS FOUND, BUT WE COULD NOT MEET ANYONE AT THE LOCATION. THE AREA IS COMMERCIAL, BUT A PAYTM QR CODE WAS NOT SEEN. WE CONNECTED WITH THE APPLICANT VIA PHONE, BUT THE CALL WAS NOT PICKED UP. THE APPLICANT WAS NOT CONTACTABLE. INQUIRIES MADE FROM THE SURROUNDING AREA CONFIRMED THAT THEY DID NOT KNOW THE APPLICANT.</p>
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20	Take Photo if Name Plate / Address plate – Available	
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21	Shop front photo with full vertical viewpoint i.e; shop board, sealing, entrance, ground on which the shop is established (cemented, pilers, bricks, stands, mud, wheels etc.)	
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22

Take Photo of Person Met Inside the Shop



23

Take Photo of QR Code/Soundbox/EDC Machine



24

Shop front with horizontal view covering the left & right of the shop establishing if the shop is an individual structure, in a marketplace, highway, isolated place, in a cluster framework.



25

Shop inside with inventory photos establishing that the inside is of the same shop where the front photo was taken



26

Neighbourhood photo of the shop



### Important - Mandatory to be filled

1	Date and Time of Visit	25-04-2025 15:07:03
2	Name of the person doing Field Verification(FV)	R001124101
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Anshu *

