

Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	fbb3933d-a3ad-4278-a3e6-b901664240fb
2	Name of customer	ADITYA
3	Address	Kailash opticals, Dang eye hospital, Govt.boys school, FAZILKA, Punjab, 152123
4	Address with Landmark (Address enhancements as the executive reached the shop)	kailash opticals Dang eye hospital
5	Name of Person Met	ADITYA
6	Relationship	Self
7	Ownership of Office	Rented
8	If Rented (Monthly Rent (O))	7000
9	Area Locality	Commercial
10	Name Plate / Address plate - Available	Yes
11	Years at current office	More than 3
12	Office Type	Shop in Main Market
13	Visit Lat Long	30.4116 , 74.0279
14	Type of Set up	Fixed - Pucca
15	Number of Employees	0-2
16	Neighbour Check	GOOD
17	Merchant Name	ADITYA
18	Contact Number	7087090073
19	Final Status	Positive

20	Detailed Final Remarks/Comments	<p>VISIT WAS CONDUCTED AT KAILASH OPTICALS, DANG EYE HOSPITAL, GOVT. BOYS SCHOOL, FAZILKA, PUNJAB, 152123 ON 25-04-2025 AT 14:46:03. THE ADDRESS WAS FOUND, AND THE APPLICANT, ADITYA, WAS MET. HE CONFIRMED THAT HE HAS BEEN RUNNING AN OPTICAL SHOP AT THE LOCATION FOR MORE THAN 3 YEARS, WITH A MONTHLY RENT OF RS. 7000. THE SETUP IS FIXED - PUCCA, AND 0-2 EMPLOYEES WERE PRESENT AT THE SHOP. A PAYTM QR CODE WAS OBSERVED. THE AREA IS COMMERCIAL, AND LOCAL INQUIRIES CONFIRMED THAT THE APPLICANT IS KNOWN IN THE AREA.</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.)



22

Take Photo of Person Met Inside the Shop



23

Take Photo of QR
Code/Sandbox/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 14:46:03
2	Name of the person doing Field Verification(FV)	R00968869
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Anshu -

