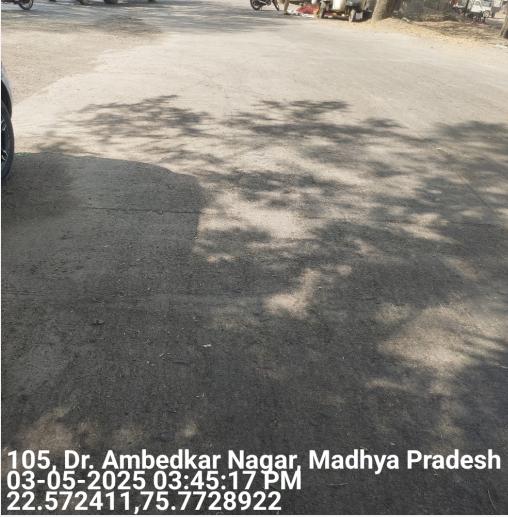
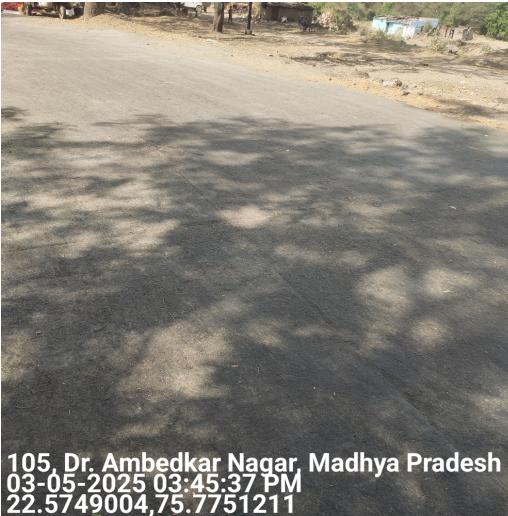
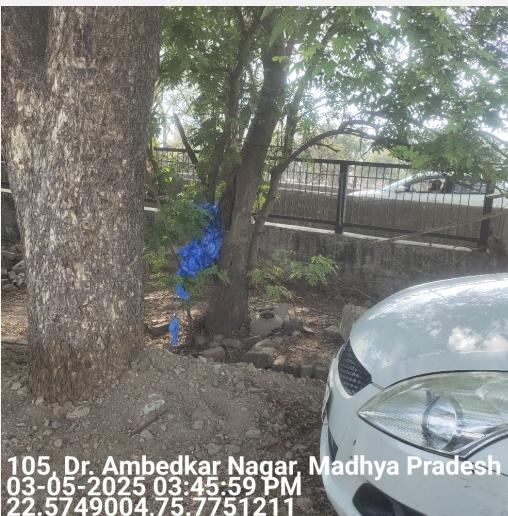
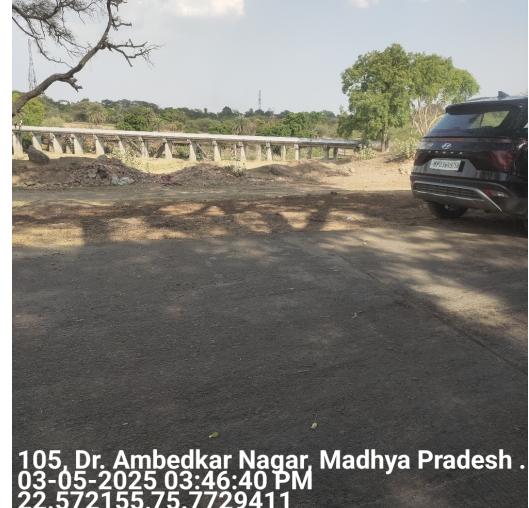
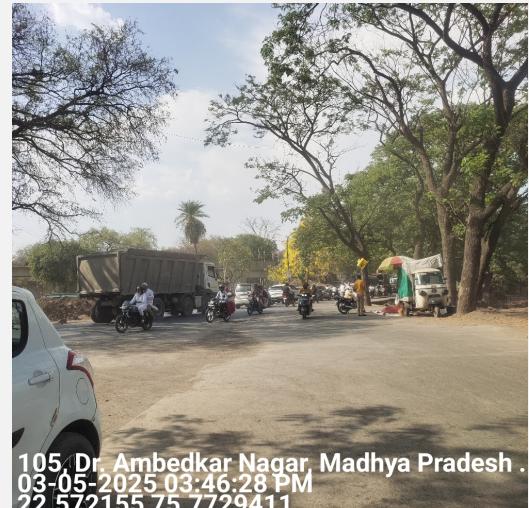


## Field Verification Report(FVR)

<b>Sr. No.</b>	<b>Person conducting Field Verification to fill/strike off relevant fields</b>	
1	Business Name	MAYUR HOSIERY
2	Customer Name / Customer Code	9200216557
3	Address	SP NO. 95, MHOW, SABJI MANDI, 453441
4	Name of the Person met	NA
5	Designation of the Contacted Person in that Firm	NA
6	Address Findings	Address not found
7	Business Premises owned or rental	NA
8	Number of years in Business	NA
9	Merchant Premises is in residential or commercial building	NA
10	Nature Of Goods sold or services given at merchant location	NA
11	Level of Stock/Inventory seen at merchant location (Good/Average/Nominal)	NA
12	Number of Employees at the merchant location	NA
13	Mswipe Machine/QR seen or not	NA
14	Merchant Neighbour Name	NA
15	Neighbour feedback on merchant	NA
16	Business Premise Size	NA
17	Business Board seen (Yes/No)	NA
18	Investigating officials comment/conclusion about address and name board sighted	NA
19	GPS Location	105, Dr. Ambedkar Nagar, Madhya Pradesh 453441, India
20	Fv Status	Null
21	Negative reason	NA

22	Gist of Discussions	NA
23	Device Pic	 <p>105, Dr. Ambedkar Nagar, Madhya Pradesh . 03-05-2025 03:45:17 PM 22.572411,75.7728922</p>
24	Name Board	 <p>105, Dr. Ambedkar Nagar, Madhya Pradesh . 03-05-2025 03:45:37 PM 22.5749004,75.7751211</p>
25	Inside of the Shop	 <p>105, Dr. Ambedkar Nagar, Madhya Pradesh . 03-05-2025 03:45:59 PM 22.5749004,75.7751211</p>

26	Outside of the Shop	 <p>105, Dr. Ambedkar Nagar, Madhya Pradesh. 03-05-2025 03:46:40 PM 22.572155,75.7729411</p>
27	Merchant Photo	 <p>105, Dr. Ambedkar Nagar, Madhya Pradesh. 03-05-2025 03:46:28 PM 22.572155,75.7729411</p>

#### Important - Mandatory to be filled

1	Date and Time of Visit	03-05-2025 15:46:57
2	Name of the person doing Field Verification(FV)	R001223344
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	
5	* Overall opinion on the account activity.	
5	Reference Number	