

Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	afe6b813-6771-4f6b-a846-f9636452ac23
2	Name of customer	shaikh mobim
3	Address	9 ,Beed Plmpalner Road ,Padmini Hospital ,India , , Gandhi Nagar ,Beed ,Beed District,BEED,Maharashtra,431122
4	Address with Landmark (Address enhancements as the executive reached the shop)	Beed
5	Name of Person Met	shaikh Mobin Pasha
6	Relationship	Self
7	Ownership of Office	Own
8	If Rented (Monthly Rent (O))	
9	Area Locality	Residential
10	Name Plate / Address plate - Available	Yes
11	Years at current office	2
12	Office Type	Shop in Residential Area
13	Visit Lat Long	18.9864 , 75.7767
14	Type of Set up	Fixed - Pucca
15	Number of Employees	0-2
16	Neighbour Check	NA
17	Merchant Name	SHAIKH MOBIN SHAIKH PASHA SHAIKH
18	Contact Number	7448019295
19	Final Status	Positive
20	Detailed Final Remarks/Comments	
21	GPS Location	Akhtar nagar, nathapur road, XQPG+CJM, Beed, Maharashtra 431122, India

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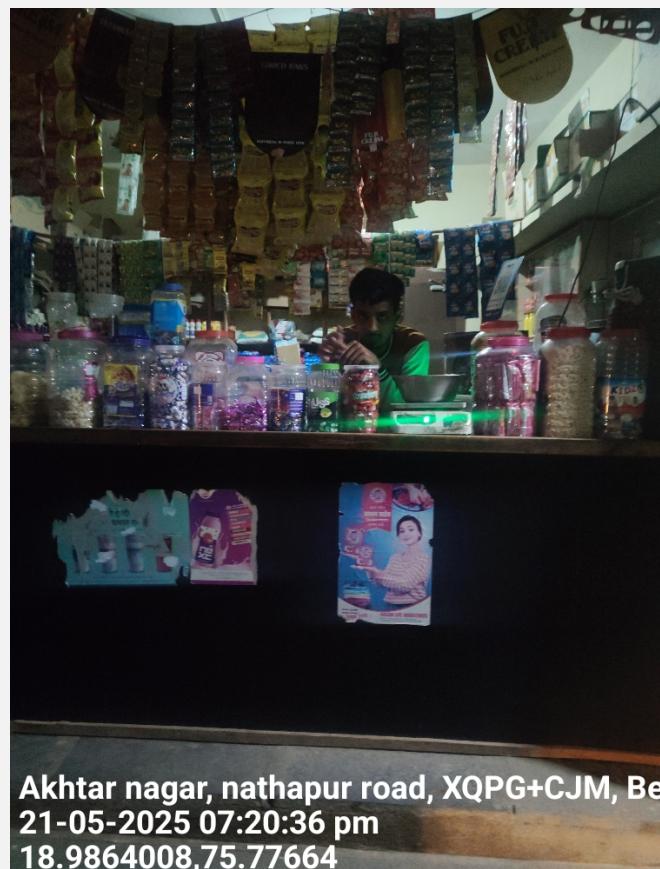
Take Photo if Name Plate / Address plate – Available



Akhtar nagar, nathapur road, XQPG+CJM, Belgaum
21-05-2025 07:19:55 pm
18.9863398,75.7765949

23

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.)



Akhtar nagar, nathapur road, XQPG+CJM, Belgaum
21-05-2025 07:20:36 pm
18.9864008,75.77664

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Take Photo of Person Met Inside the Shop



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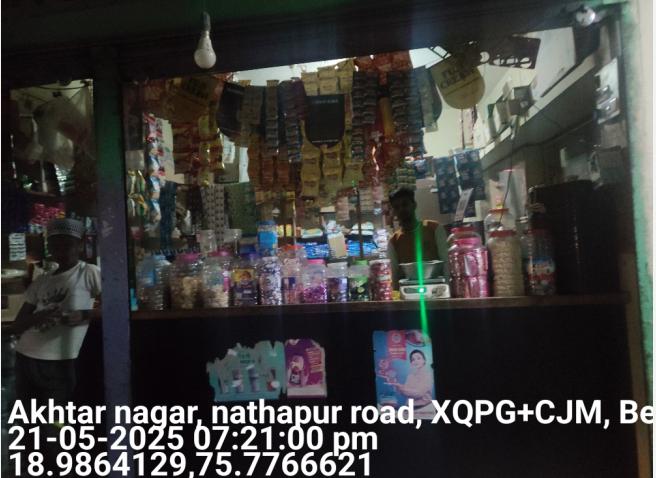
Take Photo of QR Code/Soundbox/EDC Machine



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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.



27	Shop inside with inventory photos establishing that the inside is of the same shop where the front photo was taken	 <p>Akhtar nagar, nathapur road, XQPG+CJM, Be 21-05-2025 07:21:00 pm 18.9864129,75.7766621</p>
28	Neighbourhood photo of the shop	 <p>Akhtar nagar, nathapur road, XQPG+CJM, Be 21-05-2025 07:22:24 pm 18.9864306,75.7766709</p>

Important - Mandatory to be filled

1	Date and Time of Visit	21-05-2025 19:25:01
2	Name of the person doing Field Verification(FV)	R001143565
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	

