

## Field Verification Report(FVR)

| Sr. No. | Person conducting Field Verification to fill/strike off relevant fields                        |                                                                                                         |
|---------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| 1       | Account Number, Customer Name                                                                  | 5103603337, DHARAMINDER SINGH                                                                           |
| 2       | Address                                                                                        | Floor 3 pvt shakharpur Savakar Block<br>Shakharpur New Delhi DELHI 110092,<br>EAST DELHI, DELHI, 110092 |
| 3       | Address Findings                                                                               | Entity/Address not traceable                                                                            |
| 4       | Name Board Sighted                                                                             | No name board seen                                                                                      |
| 5       | Investigating officials<br>comment/conclusion about address and<br>name board sighted          |                                                                                                         |
| 6       | Whether authorised signatory met or<br>not?                                                    | Yes                                                                                                     |
| 7       | Who was contacted at customer's<br>address?                                                    | no one                                                                                                  |
| 7a      | How related to customer?                                                                       | N/A                                                                                                     |
| 7b      | Gist of discussions                                                                            | N/A                                                                                                     |
| 8       | If authorised signatory not met, the<br>reasons for it and inquiries made about<br>whereabouts | N/A                                                                                                     |
| 9       | Customer's reaction at time of Field<br>Verification                                           | comfortable                                                                                             |
| 10      | Business Premise Type                                                                          | N/A                                                                                                     |
| 11      | Nature of business                                                                             | N/A                                                                                                     |
| 12      | Related stock seen in premises?                                                                | N/A                                                                                                     |
| 13      | Duration of occupancy at current<br>premise - indicating since when<br>occupied                |                                                                                                         |
| 13a     | In case of rented agreement till which<br>date agreement exists                                | N/A                                                                                                     |
| 14      | Business Premise Size                                                                          | N/A                                                                                                     |
| 15      | Total Employee strength                                                                        | N/A                                                                                                     |
| 16      | No. of Employees seen during visit                                                             | N/A                                                                                                     |

|     |                                                                |                                                                                  |
|-----|----------------------------------------------------------------|----------------------------------------------------------------------------------|
| 17  | Other relevant details which you would like to share           |                                                                                  |
| 18  | Any complaints against the customer                            |                                                                                  |
| 18a | Please specify                                                 |                                                                                  |
| 19  | Enquiry details of customer from its surrounding/market        |                                                                                  |
| 20  | Do Neighbours/ Neighbouring shops or offices know the customer |                                                                                  |
| 21  | Customer employment details(in case of Saving account)         |                                                                                  |
| 22  | GPS Location                                                   | M73R+8VQ, Arjun Gali, Radhey Puri Extension, Krishna Nagar, Delhi, 110051, India |

### Important - Mandatory to be filled

|   |                                                  |                                                                                       |
|---|--------------------------------------------------|---------------------------------------------------------------------------------------|
| 1 | Date and Time of Visit                           | 22-05-2025 13:07:53                                                                   |
| 2 | Name of External Agency                          | RNFI SERVICES LIMITED                                                                 |
| 3 | Name of Checker for FV Report                    |                                                                                       |
| 4 | Signature of person doing Field Verification(FV) |  |
| 5 | Signature of Checker for FV Report               |                                                                                       |
| 6 | * FV Status                                      | FV negative                                                                           |
| 7 | * Overall opinion on the account activity.       |                                                                                       |

