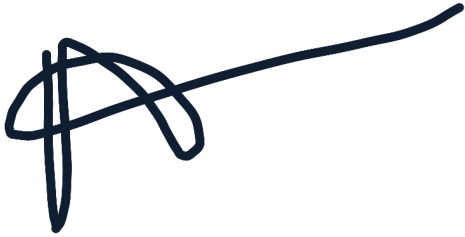


Field Verification Report(FVR)

Sr. No.	Person conducting Field Verification to fill/strike off relevant fields	
1	Account Number, Customer Name	159939742581, MR MD SHAHZAD ALAM
2	Address	E-191/1,FIRST FLOOR SHAHEEN BAGH ABUL FAZAL NEW DELHI . NEW DELHI DELHI INDIA 110025, NEW DELHI , DELHI, 110025
3	Address Findings	ADDRESS FOUND
4	Name Board Sighted	NO NAME BOARD SEEN
5	Investigating officials comment/conclusion about address and name board sighted	VISIT CONDUCTED AT GIVEN ADDRESS ON DATE 28-05-2025 18:06:29. ENTITY CONTACTED, WHERE WE MET WITH NOOR AHMAD (NEIGHBOUR). APPLICANT OCCUPANCY AT THE CURRENT PREMISE IS FROM 2019. AND THE PREMISE IS OWNED. GIVEN AREA IS RESIDENTIAL. THE EMPLOYMENT STATUS OF THE APPLICANT IS BUSINESS AREA AND NEIGHBOUR CONFIRMED THEY KNOWS THE APPLICANT, BUT APPLICANT NOT AVAILABLE WHILE VISIT.
6	Whether authorised signatory met or not?	NO
7	Who was contacted at customer's address?	NOOR AHMAD
7a	How related to customer?	NEIGHBOUR
7b	Gist of discussions	N/A
8	If authorised signatory not met, the reasons for it and inquiries made about whereabouts	N/A
9	Customer's reaction at time of Field 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 premise - indicating since when occupied	Jan/2019
13a	In case of rented agreement till which date agreement exists	N/A
14	Business Premise Size	N/A
15	Total Employee strength	
16	No. of Employees seen during visit	N/A
17	Other relevant details which you would like to share	N/A
18	Any complaints against the customer	N/A
18a	Please specify	N/A
19	Enquiry details of customer from its surrounding/market	yes
20	Do Neighbours/ Neighbouring shops or offices know the customer	yes
21	Customer employment details(in case of Saving account)	Business
22	GPS Location	G-8 Main, Kalindi Kunj Rd, near Cribs Hospital, Block F, Okhla, New Delhi, Delhi 110025, India

Important - Mandatory to be filled		
1	Date and Time of Visit	28-05-2025 18:06:29
2	Name of External Agency	RNFI SERVICES LIMITED
3	Name of Checker for FV Report	Neeraj Anand

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.	

