

## Field Verification Report(FVR)

| Sr. No. | Question   | Answer   |
|---------|--|--|
| 1       | Order Number/ Case Identifier  | 75a38841-1354-4b4c-9d57-da8f157bc4ed   |
| 2       | Name of customer   | ns   |
| 3       | Address  | 16 Parasia - Nabinagar Road, , Anwari Kaimur Patna Division, Kaimur, Bihar, 821109 |
| 4       | Address with Landmark (Address enhancements as the executive reached the shop) | na   |
| 5       | Name of Person Met   | na   |
| 6       | Relationship   | na   |
| 7       | Ownership of Office  | Parental   |
| 8       | If Rented (Monthly Rent (O))   |  |
| 9       | Area Locality  | Residential  |
| 10      | Name Plate / Address plate - Available   | No   |
| 11      | Years at current office  | Less Than 1  |
| 12      | Office Type  | Shop in Residential Area   |
| 13      | Visit Lat Long   | 25.1589 , 83.6224  |
| 14      | Type of Set up   | Temporary  |
| 15      | Number of Employees  | 0-2  |
| 16      | Neighbour Check  | na   |
| 17      | Merchant Name  | ASHISH KUMAR CHOUDHRY  |
| 18      | Contact Number   | 7319919112   |
| 19      | Final Status   | Negative   |
| 20      | Detailed Final Remarks/Comments  |  |
| 21      | GPS Location   | 5J5F+Q4R, Bhabua - Mohania Rd, Anwari, Bihar 821109, India                         |

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.)



24

Take Photo of Person Met  
Inside the Shop



25

Take Photo of QR  
Code/Soundbox/EDC  
Machine



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



28

Neighbourhood photo of the shop



5J5F+Q4R, Bhabua - Mohania Rd, Anwari, ...  
29-05-2025 10:36:54 AM  
25.158888496963264,83.62244627197006  
Pincode : 821109

**Important - Mandatory to be filled**

|   |   |  |
|---|---|--|
| 1 | Date and Time of Visit                          | <br>29-05-2025 10:37:19 |
| 2 | Name of the person doing Field Verification(FV) | R001214988   |
| 3 | Name of External Agency                         | RNFI SERVICES LIMITED  |
| 4 | Name of Checker for FV Report                   |  |