

## Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	a35c1989-143b-46be-b75c-bf56e5f204e4
2	Name of customer	Amina shaikh
3	Address	01, Chhatrapati Rajshri Shahu Maharaj chowk, Govt. Hospital, Govt. Hospital Ambajogai,Beed,Maharashtra,431517
4	Address with Landmark (Address enhancements as the executive reached the shop)	Swami Ramanand tirth hospital
5	Name of Person Met	Amir shaikh
6	Relationship	Self
7	Ownership of Office	Own
8	If Rented (Monthly Rent (O))	
9	Area Locality	Commercial
10	Name Plate / Address plate - Available	Yes
11	Years at current office	1
12	Office Type	Shop in Main Market
13	Visit Lat Long	18.7301 , 76.3706
14	Number of Employees	0-2
15	Neighbour Check	Positive
16	Merchant Name	AMINA AMIR SHAIKH
17	Contact Number	9322143874
18	Final Status	Positive
19	Detailed Final Remarks/Comments	
20	GPS Location	P9HC+W6V, Ambajogai, Maharashtra 431517, India

21

Take Photo if Name Plate / Address plate – Available



22

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.)



23

Take Photo of Person Met Inside the Shop



24

Take Photo of QR Code/Sandbox/EDC Machine



25

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.



26

Shop inside with inventory photos establishing that the inside is of the same shop where the front photo was taken



27

Neighbourhood photo of the shop



**Important - Mandatory to be filled**

1	Date and Time of Visit	30-05-2025 14:24:21
2	Name of the person doing Field Verification(FV)	R001271394
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	

