

Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	97c1d080-65a2-4fd9-9fe8-f706cbb3d0c3
2	Name of customer	Kafeel ahmad
3	Address	3 ,Dehu - Alandi Road ,Dehu ,Moshi , , Dehu ,Pune ,Pune Division,PUNE,Maharashtra,412101
4	Address with Landmark (Address enhancements as the executive reached the shop)	opp talwade hospital
5	Name of Person Met	Kafeel ahmad
6	Relationship	Self
7	Ownership of Office	Rented
8	If Rented (Monthly Rent (O))	6000
9	Area Locality	Commercial
10	Name Plate / Address plate - Available	Yes
11	Years at current office	3
12	Office Type	Shop in Main Market
13	Visit Lat Long	18.7059 , 73.7811
14	Number of Employees	2-5
15	Neighbour Check	Salman ali
16	Merchant Name	KAFEEL AHMAD
17	Contact Number	7385931889
18	Final Status	Positive
19	Detailed Final Remarks/Comments	
20	GPS Location	Talwade Jakatnaka, Maharashtra 411062, 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/Soundbox/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

03-06-2025 10:41:34

2	Name of the person doing Field Verification(FV)	SHASHIKANT BALWANT YEOLEKAR
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	

