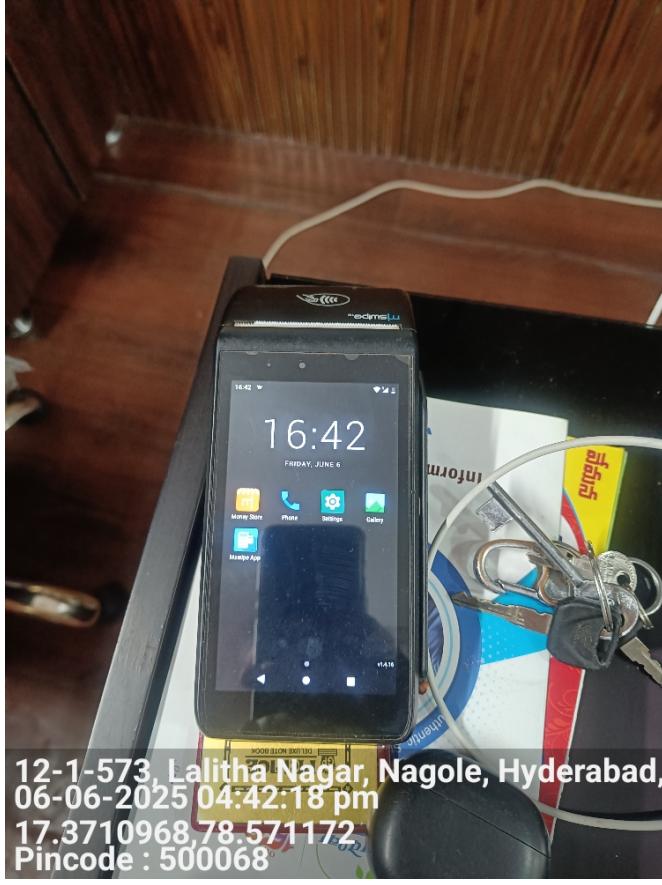


Field Verification Report(FVR)

Sr. No.	Person conducting Field Verification to fill/strike off relevant fields	
1	Business Name	MAHALAXMI AYURVEDIC CENTER
2	Customer Name / Customer Code	9401974810
3	Address	NO 12-1-573BANDLAGUDA RANGAREDDYNAGOLE MEDCHAL MALKAJGIRI
4	Name of the Person met	Mahesh
5	Designation of the Contacted Person in that Firm	owner
6	Address Findings	Address found
7	Business Premises owned or rental	Rented
8	Number of years in Business	1
9	Merchant Premises is in residential or commercial building	Commercial
10	Nature Of Goods sold or services given at merchant location	Medicine Shop
11	Level of Stock/Inventory seen at merchant location (Good/Average/Nominal)	Good
12	Number of Employees at the merchant location	1
13	Mswipe Machine/QR seen or not	Yes
14	Merchant Neighbour Name	naga raju
15	Neighbour feedback on merchant	Positive
16	Business Premise Size	Less than 500 sq ft

17	Business Board seen (Yes/No)	Name board appearing outside the building
18	Investigating officials comment/conclusion about address and name board sighted	A VISIT WAS CONDUCTED AT THE GIVEN ADDRESS: NO 12-1-573BANDLAGUDA RANGAREDDYNAGOLE MEDCHAL MALKAJGIRI ON 06-06-2025 16:46:11. ADDRESS FOUND, WHERE WE MET WITH MAHALAXMI AYURVEDIC CENTER, OWNER. THE SHOP HAS BEEN OCCUPYING THE CURRENT PREMISES FOR 1 YEARS. AND THE PREMISE IS OWNED. NAME BOARD APPEARING OUTSIDE THE BUILDING, AND AN MSWIPE DEVICE WAS AVAILABLE AT THE MERCHANT LOCATION. NATURE OF BUSINESS MEDICINE SHOP. WE ALSO INQUIRED ABOUT THE APPLICANT FROM THE SURROUNDING AREA, AND THE NEIGHBOUR NAGA RAJU CONFIRMED THAT THEY KNOW THE APPLICANT. RELATED STOCKS ARE AVAILABLE ON THE PREMISES.
19	GPS Location	6, Krushi Nagar, Jaya Puri Colony, Nagole, Hyderabad, Telangana 500068, India
20	Fv Status	Positive
22	Gist of Discussions	Positive
23	Device Pic	

24 Name Board



25 Inside of the Shop



26 Outside of the Shop



27	Merchant Photo	 <p>6, Krushi Nagar, Jaya Puri Colony, ... 06-06-2025 04:45:22 pm 17.3712212,78.5710747 Pincode : 500068</p>
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Important - Mandatory to be filled

1	Date and Time of Visit	06-06-2025 16:46:11
2	Name of the person doing Field Verification(FV)	R001318049
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Rajesh Massey
5	* Overall opinion on the account activity.	
5	Reference Number	REF32800

