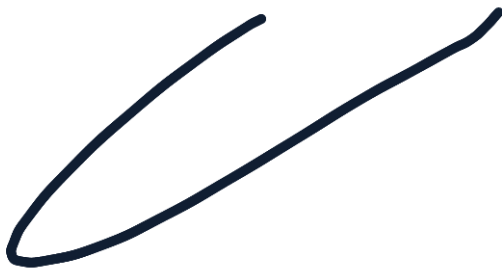


## Field Verification Report(FVR)

| Sr. No. | Person conducting Field Verification to fill/strike off relevant fields                  |                                                                                                   |
|---------|------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| 1       | Account Number, Customer Name                                                            | 5103173075, ANSHUL KUMARI                                                                         |
| 2       | Address                                                                                  | H no-42 Punchseel enclave Laal qua<br>GHAZIABAD UTTAR PRADESH 201001,<br>GHAZIABAD, DELHI, 201001 |
| 3       | Address Findings                                                                         | Entity/Address not traceable                                                                      |
| 4       | Name Board Sighted                                                                       | No name board seen                                                                                |
| 5       | Investigating officials comment/conclusion about address and name board sighted          |                                                                                                   |
| 6       | Whether authorised signatory met or not?                                                 | Yes                                                                                               |
| 7       | Who was contacted at customer's address?                                                 | na                                                                                                |
| 7a      | How related to customer?                                                                 | N/A                                                                                               |
| 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                                        |                                                                                                   |
| 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                |                                                                                                   |
| 13a     | In case of rented agreement till which date agreement exists                             | N/A                                                                                               |
| 14      | Business Premise Size                                                                    | N/A                                                                                               |
| 15      | Total Employee strength                                                                  | N/A                                                                                               |
| 16      | No. of Employees seen during visit                                                       | N/A                                                                                               |

|     |                                                                |                                                                                                                  |
|-----|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| 17  | Other relevant details which you would like to share           |                                                                                                                  |
| 18  | Any complaints against the customer                            |                                                                                                                  |
| 18a | Please specify                                                 |                                                                                                                  |
| 19  | Enquiry details of customer from its surrounding/market        |                                                                                                                  |
| 20  | Do Neighbours/ Neighbouring shops or offices know the customer |                                                                                                                  |
| 21  | Customer employment details(in case of Saving account)         |                                                                                                                  |
| 22  | GPS Location                                                   | 11, Panchsheel Lane, Opp. SBI Bank, Lal Kua, Panchsheel Colony, Lal Kuan, Ghaziabad, Uttar Pradesh 201009, India |

### Important - Mandatory to be filled

|   |                                                  |                                                                                                                                                                                |
|---|--------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | Date and Time of Visit                           | 18-06-2025 19:16:38                                                                                                                                                            |
| 2 | Name of External Agency                          | RNFI SERVICES LIMITED                                                                                                                                                          |
| 3 | Name of Checker for FV Report                    |                                                                                                                                                                                |
| 4 | Signature of person doing Field Verification(FV) | <br> |
| 5 | Signature of Checker for FV Report               |                                                                                                                                                                                |
| 6 | * FV Status                                      | FV negative                                                                                                                                                                    |
| 7 | * Overall opinion on the account activity.       |                                                                                                                                                                                |

