

Field Verification Report(FVR)

| Sr. No. | Question | Answer |
|---------|--|--|
| 1 | Order Number/ Case Identifier | 4ea36f81-de81-4b2d-8d91-141094571126 |
| 2 | Name of customer | Amar nath jaiswal |
| 3 | Address | road ,Sujanganj , , Sujanganj ,Jaunpur ,Varanasi Division,JAUNPUR,Uttar Pradesh,222201 |
| 4 | Address with Landmark (Address enhancements as the executive reached the shop) | machhalishahr road balwarganj sujanganj |
| 5 | Name of Person Met | Amar nath jaiswal |
| 6 | Relationship | Family Member |
| 7 | Ownership of Office | Own |
| 8 | If Rented (Monthly Rent (O)) | |
| 9 | Area Locality | Commercial |
| 10 | Name Plate / Address plate - Available | No |
| 11 | Years at current office | More than 3 |
| 12 | Office Type | Shop in Main Market |
| 13 | Visit Lat Long | 25.7700 , 82.2934 |
| 14 | Number of Employees | 0-2 |
| 15 | Neighbour Check | Positive |
| 16 | Merchant Name | ASHISH KUMAR |
| 17 | Contact Number | 9918559112 |
| 18 | Final Status | Positive |
| 19 | Detailed Final Remarks/Comments | |
| 20 | GPS Location | Q79V+XCF, road, Sujanganj, Uttar Pradesh 222201, India |

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 |  <p>Q79V+XCF road, Sujanganj, Uttar Pradesh 222201 20-06-2025 06:40:36 pm 25.7700205,82.2932204 Pincode : 222201</p> |
| 27 | Neighbourhood photo of the shop |  <p>Q79V+XCF road, Sujanganj, Uttar Pradesh 222201 20-06-2025 06:43:33 pm 25.7700069,82.293421 Pincode : 222201</p> |

Important - Mandatory to be filled

| | | |
|---|---|---------------------|
| 1 | Date and Time of Visit | 20-06-2025 18:43:57 |
| 2 | Name of the person doing Field Verification(FV) | TRIPURARI |

| | | |
|---|-------------------------------|-----------------------|
| 3 | Name of External Agency | RNFI SERVICES LIMITED |
| 4 | Name of Checker for FV Report | |

