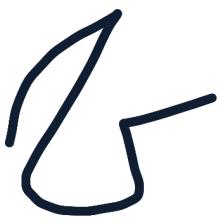


## Field Verification Report(FVR)

<b>Sr. No.</b>	<b>Person conducting Field Verification to fill/strike off relevant fields</b>	
1	Account Number, Customer Name	5102819363, SABIYA MANSOORI
2	Address	Senior resident hostel Gtb hospital ucms Dilshad garden DELHI 110095, DELHI, DELHI, 110095
3	Address Findings	ADDRESS NOT FOUND
4	Name Board Sighted	No name board seen
5	Investigating officials comment/conclusion about address and name board sighted	VIST CONDUCTED AT GIVEN ADDRESS ON DATE 23-06-2025 16:47:40, THE ADDRESS WAS NOT FOUND, AND WE COULD NOT MEET WITH ANYONE. WE THEN CALLED THE APPLICANT ON HIS PROVIDED NUMBER, AND INFORMATION NOT PROVIDED BY THE CONTACTED PERSON. THE GIVEN AREA IS RESIDENTIAL, AND NO ONE IN THE SURROUNDING AREA IS FAMILIAR WITH THE APPLICANT.
6	Whether authorised signatory met or not?	No
7	Who was contacted at customer's address?	N/A
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	N/A

13a	In case of rented agreement till which date agreement exists	N/A
14	Business Premise Size	N/A
15	Total Employee strength	
16	No. of Employees seen during visit	N/A
17	Other relevant details which you would like to share	N/A
18	Any complaints against the customer	N/A
18a	Please specify	N/A
19	Enquiry details of customer from its surrounding/market	NO
20	Do Neighbours/ Neighbouring shops or offices know the customer	NO
21	Customer employment details(in case of Saving account)	
22	GPS Location	A116, Block A, Dilshad Garden, New Delhi, Delhi, 110095, India

Important - Mandatory to be filled		
1	Date and Time of Visit	23-06-2025 16:47:40
2	Name of External Agency	RNFI SERVICES LIMITED
3	Name of Checker for FV Report	Neeraj Anand

4	Signature of person doing Field Verification(FV)	
5	Signature of Checker for FV Report	
6	* FV Status	To be continued
7	* Overall opinion on the account activity.	

