

## PERSON CONDUCTING FIELD VERIFICATION TO FILL/STRIKE OFF RELEVANT FIELDS

1	Application Id	aAhOS00000ESM5i0AH
2	Customer Name	Darshana Angre
3	Address	Building no-2, B-wing, Room no- 607, Dada saheb Gaikwad nagar, mhada Layout, Gate no-8, opp kalavidyalay college+Malvani, Malad west 400095+Maharashtra+400095
4	Contact Number	9167745927
5	Product	N/A
6	Pincode	Maharashtra 400095
7	Address Confirmed	N/A
8	OCL Range	N/A
9	Name of Person Met	N/A
10	Relationship Between Customer and Person Met	N/A
11	Landmark	N/A
12	Ease to Locate Address	N/A
13	Residence/Office Locked During Visit	N/A
14	Contact Number of Person Met	N/A
15	Applicant Age	N/A
16	Educational Details	N/A
17	ID Proof Type	N/A
18	Marital Status	N/A
19	Husband Wife Working	N/A
20	Applicant Occupation	N/A

21	Family Member Count	N/A
22	Earning Family Members	N/A
23	Ownership of Residence	N/A
24	Monthly Rent (Rs.)	N/A
25	Monthly Income	N/A
26	Name Plate or Address Plate	N/A
27	Locality of Residence	N/A
28	Years At Current Residence	N/A
29	Residence Construction	N/A
30	Area (in sqft.)	N/A
31	Asset Seen Residence	N/A
32	Comment On Interior	N/A
33	Comment On Exterior	N/A
34	Stay Confirmation	N/A
35	Neighbour Check 1 (Name)	N/A
36	Neighbour Check 1 (Feedback)	N/A
37	Neighbour Check Staying 1	N/A
38	Neighbour Check 2 (Name)	N/A
39	Neighbour Check 2 (Feedback)	N/A
40	Neighbour Check Staying 2	N/A
41	CPV Status	Negative

42	Remarks	Customer Not Available
43	Negative Area Tag	N/A
44	Verification Type	Residential
45	Latitude	19.1836115
46	Longitude	72.8191622
47	Case Id	37693
48	Date Of Report	2025-07-15
49	Time Of Report	13:11:36
50	Io Comment	WE VISITED THE REGISTERED ADDRESS AT BUILDING NO-2, B-WING, ROOM NO- 607, DADA SAHEB GAIKWAD NAGAR, MHADA LAYOUT, GATE NO-8, OPP KALAVIDYALAY COLLEGE+MALVANI, MALAD WEST 400095+MAHARASHTRA+400095 ON 15-07-2025 13:11:36. WE COULD NOT MEET ANYONE AT THE LOCATION, AND NO NAME BOARD WAS VISIBLE AND OUR PHONE , , WHO IS , . THE NEIGHBOURS FEEDBACK ARE .

51	Date of Allocation	2025-07-13
52	Time of Allocation	12:12:00

53	residence_photo_with_name_plate	
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54

residence\_photo\_with\_applicant



55

residence\_photo\_with\_agent



56

residence\_photo\_with\_inside\_household





57

residence\_photo\_outside





58	Photo with Agent	
59	Photo of ID Proof	

**Important - Mandatory to be filled**

1	Date and Time of Visit	15-07-2025 13:11:36
2	Name of the person doing Field Verification(FV)	
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Rajesh Massey

