


Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	c55c2d20-8469-4566-8a4e-1622dc719416
2	Name of customer	AAMIN ANSARI
3	Address	2, dekhni tola rod, Chitra medikal,BALAGHAT,Madhya Pradesh,481222
4	Address with Landmark (Address enhancements as the executive reached the shop)	Ianji
5	Name of Person Met	NA
6	Relationship	NA
7	Ownership of Office	NA
8	If Rented (Monthly Rent (O))	
9	Area Locality	Residential
10	Name Plate / Address plate - Available	No
11	Years at current office	NA
12	Office Type	Shop in Residential Area
13	Visit Lat Long	21.5023 , 80.5398
14	Number of Employees	NA
15	Neighbour Check	Negative
16	Merchant Name	AAMIN ANSARI
17	Contact Number	9165316039
18	Final Status	Negative

19	Detailed Final Remarks/Comments	WE VISITED THE REGISTERED ADDRESS AT 2, DEKHNI TOLA ROD, CHITRA MEDIKAL,BALAGHAT,MADHYA PRADESH,481222 ON 15-07-2025 14:45:04. ADDRESS FOUND. WE COULD NOT MEET ANYONE AT THE LOCATION, AND NO NAME BOARD WAS VISIBLE. THE AREA IS RESIDENTIAL PAYTM QR CODE NOT SEEN. WE CONNECTED WITH CALL WITH THE APPLICANT BUT HE WAS NOT INTERESTED FOR THE VERIFICATION. ENQUIRIES MADE FROM THE SURROUNDING AREA CONFIRMED THAT THEY DID NOT KNOW THE APPLICANT.
20	GPS Location	GG2Q+VW3, Lanji, Madhya Pradesh 481222, 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.)	 <p>GG2Q+VW3, Lanji, Madhya Pradesh 481222, 15-07-2025 02:44:01 PM 21.5020352,80.53994 Pincode : 481222</p>
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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



27

Neighbourhood photo of
the shop

**Important - Mandatory to be filled**

1	Date and Time of Visit	15-07-2025 14:45:04
2	Name of the person doing Field Verification(FV)	VITESH HARINKHEDE
3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Anuj Sharma

