

## Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	b22e006c-1849-47a9-b7c8-3aa2f2971077
2	Name of customer	RESHMA SAMIULLA JAHAGIRDAR
3	Address	Shop no 2, Kasar sirsi, Near nagde Hospital,Osmanabad,Maharashtra,413607
4	Address with Landmark (Address enhancements as the executive reached the shop)	OGL
5	Name of Person Met	OGL
6	Relationship	OGL
7	Ownership of Office	OGL
8	If Rented (Monthly Rent (O))	
9	Area Locality	OGL
10	Name Plate / Address plate - Available	
11	Years at current office	OGL
12	Office Type	
13	Visit Lat Long	0.0000 , 0.0000
14	Number of Employees	OGL
15	Neighbour Check	OGL
16	Merchant Name	RESHMA SAMIULLA JAHAGIRDAR
17	Contact Number	9503481072
18	Final Status	OGL
19	Detailed Final Remarks/Comments	NON FEASIBLE
20	GPS Location	

**Important - Mandatory to be filled**



1	Date and Time of Visit	16-07-2025 17:31:03
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

