

Field Verification Report(FVR)

Sr. No.	Question	Answer
1	Order Number/ Case Identifier	06a97e9d-f389-46fc-8550-f84265982681
2	Name of customer	VISHAL KUMAR
3	Address	KESHRI MEDICAL HALL, Jashpur road, Opposite PWD OFFICE, GUMLA, Jharkhand, 835207
4	Address with Landmark (Address enhancements as the executive reached the shop)	Jashpur road gumla
5	Name of Person Met	VISHAL KUMAR
6	Relationship	Self
7	Ownership of Office	Own
8	If Rented (Monthly Rent (O))	
9	Area Locality	Residential
10	Name Plate / Address plate - Available	Yes
11	Years at current office	2
12	Office Type	Shop in Main Market
13	Visit Lat Long	23.0403, 84.5400
14	Number of Employees	0-2
15	Neighbour Check	Positive
16	Merchant Name	VISHAL KUMAR
17	Contact Number	7764845999
18	Final Status	Positive

19	Detailed Final Remarks/Comments	VISIT CONDUCTED AT KESHRI MEDICAL HALL, JASHPUR ROAD, OPPOSITE PWD OFFICE, GUMLA, JHARKHAND, 835207 ON 25-07-2025 14:46:16. ADDRESS FOUND, AND THE APPLICANT, VISHAL KUMAR WAS MEET. HE CONFIRMED THAT HE HAS BEEN RUNNING A MEDICAL SHOP AT THE LOCATION FOR 2 YEARS, APPLICANT WAS PRESENT AT THE SHOP. A PAYTM QR CODE WAS OBSERVED. SHOP NAME BOARD IS MATCHED WITH THE GIVEN NAME, THE AREA IS RESIDENTIAL. LOCAL INQUIRIES CONFIRMED THAT THE APPLICANT IS KNOWN IN THE AREA.
20	GPS Location	2GRR+32V, NH 43, Gumla, Jharkhand 835207, India

21	Take Photo if Name Plate / Address plate – Available	
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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/Sandbox/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	25-07-2025 14:46:16
2	Name of the person doing Field Verification(FV)	R001213999

3	Name of External Agency	RNFI SERVICES LIMITED
4	Name of Checker for FV Report	Anuj Sharma

